

Guilford Center Local Business Plan

Quarterly Report

Fourth Quarter 2003-2004

<u>Area Authority:</u>	Guilford
<u>Director's Name:</u>	Billie M. Pierce
<u>LBP Contact Person:</u>	Ida Glasgow, Deputy Director
<u>DMH Team Liaison:</u>	Mark O'Donnell
<u>Submission Date:</u>	4th Quarter 2003 – 2004

I. Planning

- The Guilford Center's Strategic Plan was revised and updated for 2004-2007. The plan was approved by the CFAC in April and the Area Board in May.
- The Moses Cone-Wesley Long Community Health Foundation provided the following grants during their spring funding cycle to address issues/gaps for the community as a result of State reform:
 - Mental Health Association in High Point - \$47,500 for Destiny House, a psychosocial rehabilitation program.
 - Family Service of the Piedmont - \$100,000 for the Counseling Fee Assistance Plan for indigent clients who do not meet State target population criteria.
 - Guilford County Substance Abuse Coalition - \$190,650 to support the work of the Coalition.
 - Mental Health Association of Greensboro - \$90,133 for Support Source, a multi-year initiative targeting gaps in access and support.
- The Guilford Center Community Partners continues to serve as a critical vehicle for disseminating information about mental health reform and for engaging community organizations in implementation of our Local Business Plan. This group continues to expand with the addition of new representatives from public and private providers, foundations, and other community groups and currently has more than 80 members. Community Partners have received information about Guilford Center's implementation activities, the 2004-07 Strategic Plan, State Child Mental Health planning, and updates on information provided by the Division. The next Partner's meeting, scheduled for August 6, will provide an overview of Year 1 implementation of our Local Business Plan, an update on State System Reform activities (including State Plan 2004), a status report on new State Service Standards, and information about Evidence-Based Best Practices, including upcoming training opportunities.
- Guilford Center staff continue to be active in a broad range of community planning efforts conducted through coalitions that work to address community issues. An extensive list of these coalitions is included in Section X, Collaboration. Through an initiative completed this quarter, we have put in place a systematic way to be able to track and review the activities of these groups to determine how they best can be used to help implement our strategic goals.

- One coalition, the Guilford Health Partnership, is nearing the end of an extensive strategic planning process that is more clearly defining its role as a primary resource to conduct community wide assessments and disseminate resulting data for program and service planning. This will provide valuable information for community wide planning. A Guilford Center representative will continue to serve on the Steering Committee for this group.
- The Guilford Center participated in a workshop for members of the State of Latino Health Coalition, sponsored by the Center for International Understanding, UNC-CH. Teams from various regions of the State presented ideas and plans for improving access to health and mental health care for the Latino population.

I.a. CFAC Involvement

The CFAC met monthly in the past quarter. Activities included the following:

- Reviewed, provided input and approved the 2004-07 Guilford Center Strategic Plan, presented by Ida Glasgow, Deputy Director. Several strategic goals reflect continued or enhanced CFAC involvement including: developing a formal process for CFAC role in quality monitoring; ensuring consumer/family input and monitoring of the Access to Care System; and ensuring opportunities for meaningful and ongoing consumer and family input into governance, planning, implementation and monitoring of services.
- Finalized line item planning for CFAC 2004-05 budget. The total budget of \$32,894 includes funds for dependent care, transportation, meals, training, staff support, supplies and other needs. It also includes costs for enhancement of a Consumer Section on the Guilford Center Web site.
- Reviewed and voted to change the Standing Rules to reflect changes for officer positions. New or revised offices include Finance Coordinator, Education and Program Coordinator and Membership and Orientation Coordinator.
- Received Nominating Committee's recommendations for 2004-05 CFAC officers and voted approval on the slate of officers presented.
- Formalized a new category for CFAC participation called CFAC Associates. These are not official members but consumers or family members who have expressed interest in participating on Guilford Center committees or work groups. CFAC Associates must meet the same criteria as official members. Three consumers have been added for this category. A letter is being sent to consumer advocacy groups and other community groups to recruit more CFAC Associates, in order to increase consumer involvement.
- Received and reviewed third quarter reports as follows:
 - Quarterly Report required by Session Law 2001-437 to be presented to Division Secretary, County Commissioners, Board, CFAC.
 - Local Business Plan Quarterly Implementation Report.
 - Quality Improvement Department Quarterly Report
- Held an education session on Best Practices in Substance Abuse Treatment, presented by Paul Nagy of the Duke Addictions Program. This is the first in a series of membership training sessions the group is planning for the coming year on Best Practices, Disability Groups and Quality Monitoring.
- CFAC members continued to serve to provide input on Guilford Center committees. Two representatives are on the Quality Council, which meets quarterly. Two other CFAC members served on the RFP committees for selecting contracts for Substance Abuse Services, just completed this quarter. This comprehensive process lasted over a year and resulted in creation of two collaborative groups, each made up of several community agencies, which will provide services based on Best Practices in substance abuse treatment.

- Received draft of State Plan 2004 with contact information for those who wished to submit comments.
- Appointed a subcommittee to begin work in August on Consumer Section of Guilford Center Web site. This group will also begin planning for a CFAC brochure.
- Members attended a number of statewide training events, including:
 - Best Practices 2004
 - CFAC Leadership Institutes
 - Annual NAMI Conference
 - Person Centered Planning
 - Client Rights Conference
 - NC Council Spring Forum
- Finance Coordinator met with Guilford Center Business Office staff to review expense forms and guidelines developed for reporting on and monitoring CFAC budget expenditures.
- Article about CFAC membership participation in Guilford Center activities was published in NAMI-Guilford's May newsletter. The article has been updated and permission has been granted to publish this through newsletters for Mental Health Associations of Greensboro and High Point, ARCs of Greensboro and High Point. These will help build awareness of CFAC role among consumer advocacy groups and serve as one recruiting tool for new CFAC members.

II. Governance, Management, and Administration

- A new orientation program for the Area Board was developed to focus on LME functions and the Board's role and responsibilities. The four part program will be implemented during the 1st and 2nd quarters of 2004-05.
- The following training programs were offered during the 4th quarter:
 - April 6 – **"Making an Informed Decision When Selecting a CAP Provider"** was offered to CAP parents
 - April 8 – **"Making an Informed Decision When Selecting a CAP Provider"** was offered to CAP parents
 - April 14 – **Family Therapy Consultation/Training** by John Edwards, Ph.D. for child staff (Guilford Center and contract provider staff)
 - April 21 – **Motivational Enhancement Therapy for Mentally Ill and/or Substance Abusing Patients (MET)** was completed. This 15-hour course was provided by Duke staff (Jeff Georgi) to Guilford Center staff
 - May 3, 4, and 5 – **North Carolina Interventions – Part A Train the Trainer Course** was offered to Guilford Center staff and other statewide providers
 - May 12 - **Family Therapy Consultation/Training** was offered by John Edwards, Ph.D. for child staff (Guilford Center and contract provider staff)
 - June 2 and 9 – **System of Care Training** was offered to child staff of the Guilford Center as well as outside providers
 - June 9 - **Family Therapy Consultation/Training** by John Edwards, Ph.D. for child staff (Guilford Center and contract provider staff)
 - June 10 – **Indicators of Abuse and Neglect for Mental Health Professionals** was offered to Guilford Center staff by Guilford County DSS
- Reduction-in-Force Plan continued to be implemented for employees affected by divestiture.

III. Qualified Provider Network Development

- Sponsored a CAP Direct Service Provider Open House on May 3 to help consumers and families choose an agency to provide services in their person-centered plan.
- Transferred the Greensboro psychosocial rehabilitation program from the Guilford Center to the community provider selected through the RFP process, Mental Health Association of High Point.
- Selected a community provider for a Peer Mentoring program through an RFP process, Mental Health Association in Greensboro.
- Decided to retain ACTT services at the Guilford Center until new State Service Standards and service rates are implemented.
- On May 5, 2004, the substance abuse evaluation committee reviewed and ranked the four proposals received in response to the Substance Abuse RFP. The committee subsequently invited two provider groups for interviews held on May 21, 2004. Following the interview the committee recommended that both provider groups be awarded substance abuse treatment contracts for FY 04-05. The groups are: 1) Triad Treatment Collaboration with Alcohol and Drug Services of Guilford County as lead agency, and Cornerstone Psychological Services, Family Services of the Piedmont, Mary's House, and Youth Focus as partners; 2) Substance Abuse Solutions Collaboration with Caring Services as lead agency, and Residential Treatment Services of Alamance, ACT Medical Group, and Partnership for a Drug Free NC as partners.

IV. Service Management

- The two positions transferred to the Department of Social Services for the purpose of providing clinical case management to children in DSS custody who meet target population criteria now have full caseloads.
- Recruitment for Housing Resource Specialist position is ongoing.
- Completed transition of the psychosocial program to private vendor.
- Over 50 consumers taken off the CAP waiting list are now receiving services. Another 10 are in the process of having services started.

V. Access to Care

- Access Call Center received over 4,935 calls during the 4th quarter.
- Approximately 67% of the calls were requests for services and 33% 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.
- Filled position for an additional CAP care manager for plan approvals.
- Effective July 2004 began covering after hours and weekend calls for the local 211 information system.
- Cultural competence

The Guilford Center has had an active Cultural Competency Committee since 1998 with the purpose of promoting diversity among staff and ensuring provision of culturally competent services to meet the needs of our consumers. Many initiatives described in the original Local Business Plan were products of this group.

In January 2004, the Committee was reorganized to ensure the group's work met the needs of mental health reform and to determine how best to function as the Center transitioned from being primarily a provider of service to becoming an LME. New members were added to include staff from LME as well as direct service functions, including representatives from Access, Contracts Administration, Provider Relations and the Business Office. The group was charged, as it conducts its activities, with looking at not only how to meet the needs of our own staff, but also considering the future role and responsibility of the Guilford Center in working with and providing resources to our contract providers.

Since the Latino population is the largest and most rapidly growing ethnic group in Guilford County, the committee decided to focus first on how to best meet the needs of this group.

Activities included:

- A presentation by the Guilford Center representative to the Latino Health Coalition of North Carolina who traveled with a group of statewide health providers to Mexico to study the health care system and apply knowledge gained to local health issues.
- A report from our Access Director and Intake Supervisor on how Latino consumers enter our services and how their needs for interpreters or other services are met.
- An update from representatives from Crisis/Emergency Services on their efforts to establish a weekend drop-in clinic for Spanish speaking consumers.
- A presentation on clinical issues important in providing services to Latino consumers.
- A review of how Latino/Hispanic names are formed and how to determine the appropriate last name of these consumers.

This was sent to Access staff who enter names into the system and to Health Information staff who manage medical records files.

- A presentation by the director of Acción de Centro Latino, a local resource center for Latinos, on demographics, issues and resources specific to Guilford County.

The committee determined that additional work is needed to determine the extent of needs for this population, the most effective way to reach them, and to learn about other community resources for referral for these consumers.

The committee has also participated in the following projects:

- Worked with the Center for New North Carolinians to schedule a two-day training for our bilingual staff on how to be a professional interpreter. All staff who serve as interpreters will be required to receive this training to ensure appropriate criteria for interpreting are followed. This training will also be offered to interested contract provider staff.
- Began working to develop a system for making resources available to staff and contract providers. One first step was the dissemination of a notebook of cultural profiles, "Kaleidoscope," which was developed by members of the System of Care Collaborative (including the Guilford Center) to help providers more effectively serve these groups. The profiles, taken from information provided by immigrants and refugees, describe cultural practices and beliefs about family relationships, spirituality, health and mental health, and other areas. Information from this resource is currently being added to the Guilford Center Web site to make the information accessible to our contract providers as well as staff.

To assist with future planning, the group developed an extensive list of needs or gaps to address to ensure we are most effectively providing culturally appropriate services. After reviewing the needs identified, the following were designated as the top priorities:

- Further determine the need for and develop strategies to provide services for indigent immigrants and refugees.
- Further develop the use of a weekend drop-in clinic for Spanish-speaking consumers and families.
- Develop and distribute written procedures to assist staff in more efficiently identifying, scheduling and arranging payment for interpreters for languages represented in Guilford County.
- Determine needs for and develop appropriate telephone messages in Spanish (for Access line, general reception lines).
- Continue to provide training to help staff provide the most culturally appropriate services (how to be a professional interpreter, how to work with professional interpreter, understanding needs and cultural differences for various racial/ethnic groups in Guilford County).

The Committee has scheduled ongoing meetings to plan how to address these priorities and to work on other issues to improve access and culturally appropriate services to our diverse populations.

VI. Service Monitoring and Oversight: Quality Management

- Participated in the revisions of new State Monitoring Rules and in the planning of statewide implementation for Senate Bill 163 through meetings with the NC Council Rules Work Group (3), State QI Forum (1), State CR Forum (2) and ad hoc work groups (2).
- Continued Guilford Center planning meetings focused on how to staff and how to fully implement the Provider Monitoring requirements.
- Implementation activities for the major three components of the Monitoring requirements included the following:
 - ❖ Incident Reporting
 - Provided large group trainings for internal staff and contract providers to inform them of the Temporary Rules and procedural changes.
 - Began working with external providers to schedule small group trainings on the Permanent Rules and procedures in the next fiscal year.
 - Provided ongoing individual technical assistance on Incidents Reports.
 - ❖ Complaint Management
 - Developed draft of timeline form to guide and document the process for managing individual complaints.
 - Began planning for integrating new rules and our previously established complaint procedures involving the Client Rights Coordinator, the Contracts Manager, and the Quality Improvement Contractors Committee.
 - ❖ Local Provider Monitoring
 - Held in-house planning meetings to discuss manpower needs for implementation of expanded onsite monitoring of an estimated 350-500 DFS licensed and DMH approved Guilford County providers.
 - Initial plans are to primarily use time from Accreditation Specialists while looking into assistance from Care Coordinators and Best Practice positions. We hope to develop positions for a monitoring Coordinator and an Office Specialist to manage the onsite monitoring.

- We began work on sorting licensed providers and CAP providers into three "confidence level" categories in order to develop a more specific plan of action based on data available.
- We plan to develop training for consumers and family members who are interested in participating in onsite monitoring.
- Provided onsite monitoring to four Guilford County providers during this quarter (total of nineteen for the FY).
- Continued the development of an electronic database of Guilford County providers to be used to inform external providers of Rules/procedure changes and to facilitate our responses to Complaints and Incidents in our expanded monitoring activities.
- Facilitated an initial redesign of our Record Audit System to address the need for different procedures as an LME and turned it over to HIS to continue developing an expanding system for external provider record audits.
- Continued work with various staff groups, County IS representatives, and BellSouth consultants to develop the most client friendly and efficient telephone system for the Guilford Center as an LME.
- Participated in discussions regarding planning for training needs of external providers.
- Client Rights Coordinator participated in NCI Train-the-Trainer training.
- QI/CR staff attended the annual state Client Rights Conference on "Creating a Community of Supports with Consumers and Families" and the NC Council sponsored training on "Building a Framework for Quality and Customer Services as an LME".

VII. Evaluation

- Program Evaluator 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.
- Established a foundation for seeking information nationwide on utilization rates and management of provider networks.
- Created a template for monthly hospitalization data report to analyze, summarize and monitor the daily utilization of State and local bed days.
- Met with staff from the UNCG Center for the Study of Social Issues regarding the prevalence/penetration rate study they are conducting for the Guilford Center.

VIII. Financial Management and Accountability

- A severance package was provided to all staff affected by Reduction-in-Force due to divestiture of the psychosocial program.
- 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. Two support staff positions were eliminated due to consolidation of staff from two buildings into one building.
- Cross-functional teams have been meeting regularly and reviewing utilization and fiscal reports to manage the CAP virtual allocation and the bed day allocations. The year-to-date reports indicate that the Guilford Center is exceeding State expectations for decreasing bed day usage and increasing services to CAP consumers while staying within the budgeted allocation.
- The Division Medicaid audit conducted in May 2004 indicated the Guilford Center had a 100% compliance rate for Prompt Pay requirements.

IX. Information Systems and Data Management

- The Guilford Center has signed a contract with a vendor, the Creative Socio-Medics Corporation, and has begun to make preparations for the implementation of a comprehensive LME solution to allow for electronic business transactions with contract providers.

X. Collaboration

- An initiative to identify and update data on Guilford Center staffs' involvement in community coalitions and other activities was completed this quarter. The purpose was to determine how to develop a systematic way to monitor staff participation in community collaboration activities to ensure that these activities most effectively meet requirements of State Mental Health Reform and of our local Strategic Plan. The survey results demonstrate Guilford Center's ongoing and extensive participation in multidisciplinary and multi-agency planning that aims to build working relationships and strengthen the network of services and resources available to address community needs.

The groups listed below were identified as organizations working collaboratively to address community issues related to consumer needs and our service delivery. One or more Guilford Center representatives participates in each of these coalitions:

- Child Fatality Prevention Team
- Children's' Cabinet of High Point
- Commission on Aging, Piedmont Triad Council of Governments
- Community Child Protection Team
- Domestic Violence Taskforce
- Early Childhood Mental Health Consortium
- Greensboro Housing Authority Shelter Plus Committee
- Guilford County Partnership for Children
- Guilford County Wraparound Committee
- Guilford Coalition for Assistive Technology
- Guilford Community AIDS Partnership
- Guilford County System of Care Collaborative
- Guilford County Re-entry Coalition
- Guilford Health Partnership
- Guilford School Health Alliance
- Guilford Substance Abuse Coalition
- Greensboro Housing Coalition
- High Point Housing Coalition
- Human Relations Commission Committee of 100
- Juvenile Justice/Delinquency Prevention Juvenile Crime Prevention Council
- Latino Health Coalition
- LifeSpan Collaboration
- Mayor's Committee for People with Disabilities—Greensboro
- Mayor's Committee for People with Disabilities—High Point
- Mental Health and Aging Coalition
- Mental Health Awareness Coalition
- Metropolitan Medical Response System (Emergencies/Disasters)
- Multicultural Advisory Council
- NC Geriatric Task Force

- In addition to these coalitions, Guilford Center staff serve on boards, advisory committees and councils or participate in other ways with more than 40 local community organizations, faith-based groups, and colleges and universities. Many others serve in leadership roles with their professional associations. Participation in these activities helps educate community providers and other professionals about mental health reform changes and helps promote their input and participation in these efforts as needed.
- Guilford staff worked with advocacy groups and other community organizations on several public education activities. Child services staff worked with school health fairs for middle school students and an evening health program for parents of middle school students. Staff also participated in a Community Resource Fair, targeting exceptional children's teachers in the county school district, to provide information about resources our agency can offer these teachers.
- Extensive activities developed in collaboration with the Mental Health Awareness Coalition of Guilford County were presented during Mental Health Month. Guilford Center staff and a CFAC member participated in several of these. A special kick-off event at a local psychosocial program featured children, adults and seniors who shared their stories of life challenged by mental illness. Other activities included a day-long program on mental health and spirituality for clergy and others in the faith community, training programs for childcare professionals, presentation to a senior resources center, and an anxiety screening day held in conjunction with a local hospital.

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, 69% have been transitioned to community services. The breakdown of these consumers is as follows: AMTNC = **327**, CMTNC = **134**, ADTNC = **0**, CDTNC = **0**.
- It appears that a significant number of the TNC population is receiving medication services only from the Guilford Center. Community resources for this population are extremely limited. The Guilford Center is committed to continuing medication services to this population until community alternatives can be found.

Communication Bulletin #004
Housing

- Identified a funded position for use as a Housing Resource Specialist. Recruitment is underway for this position.
- Staff member currently assigned to work with the Greensboro and High Point Housing Coalitions.
- Information regarding State reform and housing issues was included in the June newsletter of the Greensboro Housing Coalition.

Communication Bulletin #007
Best Practice – Adult Mental Health

- Hired Substance Abuse Best Practice Manager.
- Recruitment for Adult Mental Health Best Practice Manager will begin 1st quarter 2004-05.
- Using Robert Wood Johnson Best Practice Tool Kits to reorganize direct services provided by the Guilford Center and to develop training plans for Guilford Center and contract staff.

Communication Bulletin #011
Child Mental Health Plan

- System of Care training was offered to Guilford Center and contract provider staff on June 2 and 9.

Communication Bulletin #017
Maintaining Public Sector Access to Psychiatrists

- The Guilford Center's approved Local Business Plan includes retaining psychiatric services as a Guilford Center function due to the scarcity of private psychiatrists in our community.

Communication Bulletin #020
Area Director Annual Evaluation Criteria

- These criteria will be included in the Director's annual evaluation by the Board for the 2004-05 fiscal year.



Guilford Center Director

July 22, 2004 _____
Date