

**PERFORMANCE IMPROVEMENT PROJECT (PIP) VALIDATION WORKSHEET FY17-18**

**NON-CLINICAL PIP**

**GENERAL INFORMATION**

**MHP:** San Diego

**PIP Title:** Client Engagement after Discharge from Psychiatric Hospital

**Start Date (MM/DD/YY):** April 2016

**Completion Date (MM/DD/YY):** Spring 2018

**Projected Study Period (#of Months):**

**Completed:** Yes  No

**Date(s) of On-Site Review (MM/DD/YY):**

**Name of Reviewer:** Rob Walton

**Status of PIP (Only Active and ongoing, and completed PIPs are rated):**

**Rated**

- Active and ongoing (baseline established and interventions started)
- Completed since the prior External Quality Review (EQR)

**Not rated. Comments provided in the PIP Validation Tool for technical assistance purposes only.**

- Concept only, not yet active (interventions not started)
- Inactive, developed in a prior year
- Submission determined not to be a PIP
- No Non-clinical PIP was submitted

**Brief Description of PIP (including goal and what PIP is attempting to accomplish):**

The MHP was aware of the poor aftercare follow-up of individuals discharged from an acute psychiatric hospital stay who were not open to outpatient services at the time of admission. The initial change was to provide a specific aftercare appointment. They considered the rate of actual follow-up and readmission rates within 7, 30, and 90 days. The MHP added follow-up reminder calls to the process. This PIP involved piloting of the process at the MHP's Psychiatric Hospital, and once there were positive results, the plan became to extend to other contract/partner hospitals.

**ACTIVITY 1: ASSESS THE STUDY METHODOLOGY**

**STEP 1: Review the Selected Study Topic(s)**

Component/Standard	Score	Comments
<p>1.1 Was the PIP topic selected using stakeholder input? Did the MHP develop a multi-functional team compiled of stakeholders invested in this issue?</p>	<p> <input checked="" type="checkbox"/> Met  <input type="checkbox"/> Partially Met  <input type="checkbox"/> Not Met  <input type="checkbox"/> Unable to Determine         </p>	<p>A multi-functional team was assembled for the purposes of developing and implementing the PIP, including subject matter experts and staff from the San Diego County Psychiatric Hospital (SDCPH), County of San Diego Behavioral Health Services (SDCBHS) staff members, clinicians and staff from select Outpatient programs, and contracted Research Centers. Additionally, we have recruited staff from the Innovations Program “Next Steps” to consult on the design of further interventions in the follow-on phases of this PIP. Next Steps is a program that works to increase linkages and engagements to services after discharge using Peer Specialists.</p> <p>Clients: Clients were interviewed from peer-based “Next Steps” program. Next Steps is a peer-based program that utilizes peer support specialists to facilitate linkages to services after discharge from inpatient facilities. As such, Next Steps staff have unique insights into the barriers to linkage encountered by clients discharging from hospitalization.</p> <p>Program staff: Program staff from SDCBHS programs.</p> <p>Clinicians: Clinicians from both the SDCPH and participating outpatient clinics. Hospital staff: Staff from the SDCPH included the Clinical Director, and both clinical and administrative staff.</p>

<p>1.2 Was the topic selected through data collection and analysis of comprehensive aspects of enrollee needs, care, and services?</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	<p>Routine analysis of no-show data as well as review of client engagement patterns after discharge from SDCPH revealed the pattern. Additionally, as part of the previous PIP, a review of Serious Incident Reports demonstrated that among clients who committed suicide in FY 2013-14, a high percentage of these suicides occurred within 90 days of their last service received in the Behavioral Health Systems of Care.</p> <p>Analyses of SDCBHS client data revealed that upon discharge from the SDCPH only 26% (605/2,312) of clients who were new to the system, or who had previously been in the system but later had closed cases, connected with services within 30 days of discharge. This compares with approximately 45% of clients who were currently active in the SDCBHS system. Furthermore, the data before and after psychiatric hospital discharge for FY 2015-16 showed that 11% of connected discharges were readmitted within 30 days compared to 15-22% for those who did not connect with services. Additionally, non-connected discharges had an average of one more EPU or PERT service prior to admission compared to connected discharges since 1/1/15. High rates of readmission and emergency visits are linked to high costs of healthcare.</p>
<p><b>Select the category for each PIP:</b></p> <p><i>Clinical:</i></p> <input type="checkbox"/> Prevention of an acute or chronic condition <input type="checkbox"/> High volume services <input type="checkbox"/> Care for an acute or chronic condition <input type="checkbox"/> High risk conditions		<p><i>Non-clinical:</i></p> <input checked="" type="checkbox"/> Process of accessing or delivering care
<p>1.3 Did the Plan's PIP, over time, address a broad spectrum of key aspects of enrollee care and services?</p> <p><i>Project must be clearly focused on identifying and correcting deficiencies in care or services, rather than on utilization or cost alone.</i></p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	<p>Assuring aftercare for hospital discharged individuals who were not connected with outpatient prior to the hospitalization.</p>
<p>1.4 Did the Plan's PIPs, over time, include all enrolled populations (i.e., did not exclude certain enrollees such as those with special health care needs)?</p> <p><i>Demographics:</i></p> <input type="checkbox"/> Age Range <input type="checkbox"/> Race/Ethnicity <input type="checkbox"/> Gender <input type="checkbox"/> Language <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	<p>All hospital discharges not connected to outpatient at the time of admission.</p>

<b>Totals</b>		<b>4</b> Met <b>0</b> Partially Met <b>0</b> Not Met <b>0</b> UTD
<b>STEP 2: Review the Study Question(s)</b>		
<p>2.1 Was the study question(s) stated clearly in writing? Does the question have a measurable impact for the defined study population?</p> <p><i>Include study question as stated in narrative:</i> Will the development of a standardized process for acute hospital discharged, new consumers (new to the system or not currently active with the SDCBHS) – which includes an aftercare appointment within three days of discharge and a reminder call – improve outpatient engagement by 10% to 30% and reduce readmissions by 10% to 30%?</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	
<b>Totals</b>		<b>1</b> Met <b>0</b> Partially Met <b>0</b> Not Met <b>0</b> UTD
<b>STEP 3: Review the Identified Study Population</b>		
<p>3.1 Did the Plan clearly define all Medi-Cal enrollees to whom the study question and indicators are relevant?</p> <p><i>Demographics:</i>  <input type="checkbox"/> Age Range <input type="checkbox"/> Race/Ethnicity <input type="checkbox"/> Gender <input type="checkbox"/> Language <input checked="" type="checkbox"/> Other         </p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	All individuals who were admitted to the MHP’s Psychiatric Hospital and were new or closed at the time of hospitalization.
<p>3.2 If the study included the entire population, did its data collection approach capture all enrollees to whom the study question applied?</p> <p><i>Methods of identifying participants:</i>  <input type="checkbox"/> Utilization data <input type="checkbox"/> Referral <input type="checkbox"/> Self-identification  <input checked="" type="checkbox"/> Other: Individuals who have been in the MHP psychiatric hospital and discharged, and who were either closed at the time of admission or new to MHP services.         </p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	The population was initially limited to the MHP’s Psychiatric Hospital consumers with consideration of expansion to contract hospitals eventually.
<b>Totals</b>		<b>2</b> Met <b>0</b> Partially Met <b>0</b> Not Met <b>0</b> UTD

STEP 4: Review Selected Study Indicators									
<p>4.1 Did the study use objective, clearly defined, measurable indicators?</p> <p><i>List indicators:</i>            Connection with services after discharge – 7, 30, 90 days            Readmission rates – 7, 30, 90 days</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine								
<p>4.2 Did the indicators measure changes in: health status, functional status, or enrollee satisfaction, or processes of care with strong associations with improved outcomes? All outcomes should be consumer focused.</p> <p><input type="checkbox"/> Health Status                      <input type="checkbox"/> Functional Status  <input type="checkbox"/> Member Satisfaction              <input type="checkbox"/> Provider Satisfaction</p> <p>Are long-term outcomes clearly stated? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Are long-term outcomes implied? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	<p>Follow-up and readmissions are indicators of outcomes.</p>							
<b>Totals</b>		<b>2</b>	Met	<b>0</b>	Partially Met	<b>0</b>	Not Met	<b>0</b>	UTD
STEP 5: Review Sampling Methods									
<p>5.1 Did the sampling technique consider and specify the:</p> <p>a) True (or estimated) frequency of occurrence of the event?            b) Confidence interval to be used?            c) Margin of error that will be acceptable?</p>	<input type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Unable to Determine	<p>The MHP describes the approach as sampling, however all individuals meeting the criteria of not open at admission are included. Therefore, it is not using a classic sampling approach to this population. Sampling could relate to all hospital admissions. For the pilot involved in this PIP, the MHP used a subset of all hospitals that serve the MHP’s consumers. This is a more reasonable approach and will create more consistent testing of interventions.</p>							

<p>5.2 Were valid sampling techniques that protected against bias employed?</p> <p><i>Specify the type of sampling or census used:</i> &lt;Text&gt;</p>	<input type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Unable to Determine	
<p>5.3 Did the sample contain a sufficient number of enrollees?</p> <p>_____ N of enrollees in sampling frame  _____ N of sample  _____ N of participants (i.e. – return rate)</p>	<input type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Unable to Determine	
<b>Totals</b>		<b>0</b> Met <b>0</b> Partially Met <b>3</b> Not Applicable <b>0</b> UTD
<b>STEP 6: Review Data Collection Procedures</b>		
<p>6.1 Did the study design clearly specify the data to be collected?</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	<ul style="list-style-type: none"> <li>○ Demographic information as follows: <ul style="list-style-type: none"> <li>▪ Age</li> <li>▪ Gender</li> <li>▪ Preferred Language</li> <li>▪ Race/Ethnicity</li> <li>▪ Educational Level</li> <li>▪ Employment Status</li> <li>▪ Insurance Status</li> <li>▪ Living Situation</li> <li>▪ Diagnosis</li> <li>▪ Substance Use Diagnosis</li> <li>▪ Treatment Level of Care</li> </ul> </li> <li>○ Connection with services after hospital discharge: This is defined as having a service at a SDCBHS outpatient or case management clinic within 7, 30 or 90 days after discharge.</li> </ul> <p>Readmission data for 7, 30, and 90 days after discharge.</p>
<p>6.2 Did the study design clearly specify the sources of data?</p> <p><i>Sources of data:</i></p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met	<p>Upon discharge, hospital staff will work with the new clients to make an appointment at one of three participating clinics servicing a broad</p>

<input type="checkbox"/> Member <input type="checkbox"/> Claims <input type="checkbox"/> Provider <input checked="" type="checkbox"/> Other: See far right	<input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	<p>geographic region. The clinic staff will keep logs (Appendix A) documenting clients' date of discharge and date of scheduled appointments as communicated from the SDCPH. These logs were submitted to SDCBHS on a monthly basis. The UCSD contractors used these logs to pull additional client information from the SDCBHS MHS, Cerner Community Behavioral Health (CCBH) system to look at the service utilization post-discharge. The information pulled from CCBH included demographics and a list of all services used. This method of data collection assures that the most accurate data is collected about all of the clients who participate in this PIP intervention.</p>
<p>6.3 Did the study design specify a systematic method of collecting valid and reliable data that represents the entire population to which the study's indicators apply?</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	<p>Each clinic used an Excel log to keep track of PIP intervention clients. Any issues related to the use of the logs were discussed during regular meetings with representatives from each of the three participating clinics, SDCPH, SDCBHS, and contractors from UCSD to assure accurate and consistent data collection over time. The information collected included:</p> <ul style="list-style-type: none"> <li>○ Client ID</li> <li>○ Client name</li> <li>○ Date of discharge</li> <li>○ Date of birth</li> <li>○ Date of appointment</li> </ul> <p>Status of appointment (e.g., no-show, etc.)</p>
<p>6.4 Did the instruments used for data collection provide for consistent, accurate data collection over the time periods studied?</p> <p><i>Instruments used:</i></p> <input type="checkbox"/> Survey <input checked="" type="checkbox"/> Medical record abstraction tool <input type="checkbox"/> Outcomes tool <input type="checkbox"/> Level of Care tools <input checked="" type="checkbox"/> Other: Excel spread sheets	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	

<p>6.5 Did the study design prospectively specify a data analysis plan? Did the plan include contingencies for untoward results?</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	<p>The data analysis plan entailed:</p> <ul style="list-style-type: none"> <li>• Calculation of engagement and readmission rates for new clients as described in Step 5 above.</li> <li>• Analytic comparisons of demographics and other defining characteristics for new clients and existing clients during the PIP year. This will help determine if person-level characteristics (beyond status as an existing client) may perhaps differ between these groups. This will help explain unexpected or low-level results.</li> </ul> <p>Data was summarized, reported, and reviewed at least quarterly.</p>
<p>6.6 Were qualified staff and personnel used to collect the data? <i>Project leader: Liz Mile and Steve Tally</i></p> <ul style="list-style-type: none"> <li>○ Administrative staff at SDCPH: Psychiatric Social Worker Coordinator – Stephanie Sambrano, MS, LMFT; Mental Health Case Management Clinician – Nancy Nguyen, MSW.</li> </ul> <p>County-operated Outpatient Clinics: North Central Program Manager – Elene Bratton, MS, LMFT; East County Program Manager – Michelle Raby, LMFT; Southeast Program Manager – Diana Cobb.</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	
<b>Totals</b>		<b>6</b> Met <b>0</b> Partially Met <b>0</b> Not Met <b>0</b> UTD

STEP 7: Assess Improvement Strategies		
<p>7.1 Were reasonable interventions undertaken to address causes/barriers identified through data analysis and QI processes undertaken?</p> <p><i>Describe Interventions:</i></p> <p>Providing an appointment to an appropriate service provider (along with specific contact information) to clients who are discharged from a psychiatric hospital (and are not currently active in the SDCBHS system).</p> <p>Once the appointment is made, providers will provide a follow-up reminder phone call and an informational flyer regarding the program.</p>	<input type="checkbox"/> Met <input checked="" type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	<p>The two key intervention elements were a specific follow-up appointment time at discharge, and a reminder phone call.</p> <p>Since this PIP is intended to have a significant impact, the MHP would have provided more improvement opportunities by creating a list of additional interventions that were identified and prepared for implementation, pending the results of periodic data review.</p> <p>Some of these added interventions could have been in the form of additional reminders – perhaps considering secure text messages if results were not as planned – or querying consumers about transportation needs and developing strategies to assist with that potential need.</p>
<b>Totals</b>		<b>0</b> Met <b>1</b> Partially Met <b>0</b> Not Met <b>0</b> NA <b>0</b> UTD
STEP 8: Review Data Analysis and Interpretation of Study Results		
<p>8.1 Was an analysis of the findings performed according to the data analysis plan?</p> <p><i>This element is "Not Met" if there is no indication of a data analysis plan (see Step 6.5)</i></p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Not Applicable <input type="checkbox"/> Unable to Determine	<p style="text-align: center;">The MHP's response below:</p> <p>The data analysis plan involved the calculation of engagement rates. The comparison of rates and proportions by means of statistical methods and hypothesis testing was not a planned part of the process at this point due to the small sample size. However, it should be noted that given the outcomes for those clients who do not engage with the referred clinic (e.g., usage of emergency or jail services), the practical and clinical significance of any increased engagement is already evident, even if statistical significance is not attained.</p>
<p>8.2 Were the PIP results and findings presented accurately and clearly?</p> <p>Are tables and figures labeled?      <input checked="" type="checkbox"/> Yes   <input type="checkbox"/> No</p> <p>Are they labeled clearly and accurately?   <input checked="" type="checkbox"/> Yes   <input type="checkbox"/> No</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Not Applicable <input type="checkbox"/> Unable to Determine	

<p>8.3 Did the analysis identify: initial and repeat measurements, statistical significance, factors that influence comparability of initial and repeat measurements, and factors that threaten internal and external validity?</p> <p>Indicate the time periods of measurements: monthly tracking FY summarizing and reporting</p> <p>Indicate the statistical analysis used: Percentage</p> <p>Indicate the statistical significance level or confidence level if available/known: NA XX Unable to determine</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Not Applicable <input type="checkbox"/> Unable to Determine	<p>MHP's analysis indicated insufficient numbers for statistical significance determination. However, improvement did occur. Noted was the decrease in rehospitalizations at 90 days in particular.</p>
<p>8.4 Did the analysis of the study data include an interpretation of the extent to which this PIP was successful and recommend any follow-up activities?</p> <p><i>Limitations described:</i>  Limited numbers of participants</p> <p><i>Conclusions regarding the success of the interpretation:</i>  Promising practice</p> <p><i>Recommendations for follow-up:</i>  Continue extension of this practice to other hospitals and consumers</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Not Applicable <input type="checkbox"/> Unable to Determine	<p>The PIP also performed follow-up of outcomes of those who did not engage and found that subsequent contacts were often with crisis or law enforcement.</p>
<b>Totals</b>		<b>4</b> Met <b>0</b> Partially Met <b>0</b> Not Met <b>0</b> NA <b>0</b> UTD
<b>STEP 9: Assess Whether Improvement is "Real" Improvement</b>		
<p>9.1 Was the same methodology as the baseline measurement used when measurement was repeated?</p> <p><i>Ask: At what interval(s) was the data measurement repeated?</i></p> <p><i>Were the same sources of data used?</i></p> <p><i>Did they use the same method of data collection?</i></p> <p><i>Were the same participants examined?</i></p> <p><i>Did they utilize the same measurement tools?</i></p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Not Applicable <input type="checkbox"/> Unable to Determine	

<p>9.2 Was there any documented, quantitative improvement in processes or outcomes of care?</p> <p>Was there: <input checked="" type="checkbox"/> Improvement <input type="checkbox"/> Deterioration</p> <p>Statistical significance: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Clinical significance: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Not Applicable <input type="checkbox"/> Unable to Determine	
<p>9.3 Does the reported improvement in performance have internal validity; i.e., does the improvement in performance appear to be the result of the planned quality improvement intervention?</p> <p><i>Degree to which the intervention was the reason for change:</i></p> <p><input type="checkbox"/> No relevance <input type="checkbox"/> Small <input checked="" type="checkbox"/> Fair <input type="checkbox"/> High</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Not Applicable <input type="checkbox"/> Unable to Determine	
<p>9.4 Is there any statistical evidence that any observed performance improvement is true improvement?</p> <p><input type="checkbox"/> Weak <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Strong</p>	<input type="checkbox"/> Met <input checked="" type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Not Applicable <input type="checkbox"/> Unable to Determine	Simple percentage, no statistical significance evident.
<p>9.5 Was sustained improvement demonstrated through repeated measurements over comparable time periods?</p>	<input type="checkbox"/> Met <input checked="" type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Not Applicable <input type="checkbox"/> Unable to Determine	The MHP's PIP is nearly completed but there remains another data review and summarization to occur in the Spring of 2018.
<b>Totals</b>		<b>3</b> Met <b>2</b> Partially Met <b>0</b> Not Met <b>0</b> NA <b>0</b> UTD

ACTIVITY 2: VERIFYING STUDY FINDINGS (OPTIONAL)		
Component/Standard	Score	Comments
Were the initial study findings verified (recalculated by CalEQRO) upon repeat measurement?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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**ACTIVITY 3: OVERALL VALIDITY AND RELIABILITY OF STUDY RESULTS: SUMMARY OF AGGREGATE VALIDATION FINDINGS**

*Conclusions:*

The MHP engaged in a set of logical actions to improve follow-up and reduce re-hospitalization following hospital discharge.

*Recommendations:*

Consider expansion of this approach to a broader population and all hospitals.

Check one:

High confidence in reported Plan PIP results

Low confidence in reported Plan PIP results

Confidence in reported Plan PIP results

Reported Plan PIP results not credible

Confidence in PIP results cannot be determined at this time