

PERFORMANCE IMPROVEMENT PROJECT (PIP) VALIDATION WORKSHEET FY17-18

NON-CLINICAL PIP

GENERAL INFORMATION

MHP: Sonoma County Behavioral Health

PIP Title: Enhancing Timeliness of Assessments and Treatments for Youth and Families

Start Date (MM/DD/YY): 7/1/2017

Completion Date (MM/DD/YY): 6/30/2019

Projected Study Period (#of Months):24

Completed: Yes No

Date(s) of On-Site Review (MM/DD/YY): 1/16-17/2018

SONOMA of Reviewer: Rama Khalsa, PhD lead reviewer, Melissa Ladrech, Sonoma QM manager

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):

Past data indicate low timeliness in meeting needs of youth for assessments (27.8 days) while the standard is 10 business days to get an assessment. Two interventions were identified to improve the timeliness outcomes for youth and family access. The goal is to reduce access to assessments to 10 business days or less to see continued functional improvements as reflected on the CANS data for youth from initial assessment to each 6-month period.

ACTIVITY 1: ASSESS THE STUDY METHODOLOGY

STEP 1: Review the Selected Study Topic(s)		
Component/Standard	Score	Comments
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?	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	
1.2 Was the topic selected through data collection and analysis of comprehensive aspects of enrollee needs, care, and services?	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	
Select the category for each PIP: <i>Clinical:</i> <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		<i>Non-clinical:</i> <input checked="" type="checkbox"/> Process of accessing or delivering care
1.3 Did the Plan's PIP, over time, address a broad spectrum of key aspects of enrollee care and services? <i>Project must be clearly focused on identifying and correcting deficiencies in care or services, rather than on utilization or cost alone.</i>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	Timeliness of assessments and treatment visits
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)? <i>Demographics:</i> <input checked="" type="checkbox"/> Age Range <input checked="" type="checkbox"/> Race/Ethnicity <input checked="" type="checkbox"/> Gender <input checked="" 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	
Totals		4 Met 0 Partially Met 0 Not Met 0 UTD

STEP 2: Review the Study Question(s)									
<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 adding intake capacity and treatment capacity slots/requirements to provider contracts and centralizing intake access, result in improvement of timeliness of assessments to standard of 10 business days and maintain or improve CANS scores for youth?</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	Timeliness of Assessments for youth is key area of improvement being sought by PIP interventions.							
Totals		1	Met	0	Partially Met	0	Not Met	0	UTD
STEP 3: Review the Identified Study Population									
<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 checked="" type="checkbox"/> Age Range <input checked="" type="checkbox"/> Race/Ethnicity <input checked="" type="checkbox"/> Gender <input checked="" type="checkbox"/> Language <input 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	Yes							
<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 checked="" type="checkbox"/> Utilization data <input type="checkbox"/> Referral <input type="checkbox"/> Self-identification <input checked="" type="checkbox"/> Other: Requests for services to centralized access call center </p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	Yes							
Totals		2	Met	0	Partially Met	0	Not Met	0	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> Days from request to assessment appointment, CANS scores</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	Yes							

<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 checked="" type="checkbox"/> Functional Status <input checked="" 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>CANS scores were tracked from intake to every 6 months and service data from call center requests and actual visits as reflected in service billing data were used.</p>
Totals		2 Met 0 Partially Met 0 Not Met 0 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>No sampling used</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></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>No sampling used</p>
<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	<p>No sampling used</p>
Totals		0 Met 0 Partially Met 0 Not Met 0 UTD

STEP 6: Review Data Collection Procedures		
6.1 Did the study design clearly specify the data to be collected?	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	Yes, pre and post CANS scores and days from request to face-to-face assessment.
6.2 Did the study design clearly specify the sources of data? <i>Sources of data:</i> <input type="checkbox"/> Member <input checked="" type="checkbox"/> Claims <input type="checkbox"/> Provider <input type="checkbox"/> Other: CANS	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	Claims, Access phone log, and CANS scores are key sources of data.
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?	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	Yes, described in detail.
6.4 Did the instruments used for data collection provide for consistent, accurate data collection over the time periods studied? <i>Instruments used:</i> <input type="checkbox"/> Survey <input type="checkbox"/> Medical record abstraction tool <input checked="" type="checkbox"/> Outcomes tool <input type="checkbox"/> Level of Care tools <input checked="" type="checkbox"/> Other: Access logs for requests, claims for assessment visits	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	Yes, CANS is a State regulated outcome tool.
6.5 Did the study design prospectively specify a data analysis plan? Did the plan include contingencies for untoward results?	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	The plan was clear, but only quarter one data were available.

<p>6.6 Were qualified staff and personnel used to collect the data? <i>Project leader: Melissa Ladrech</i> SONOMA: QI Manager & Youth chief Management & IS claims Title: See above Role: Tracking requests, assessments, CANS <i>Other team members:</i> SONOMAs: See PIP. Too extensive to list.</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	
Totals		6 Met 0 Partially Met 0 Not Met 0 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? <i>Describe Interventions:</i></p>	<input type="checkbox"/> Met <input checked="" type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	<p>First quarter data was not encouraging due to staff vacations, school closures for SED, and fires</p>
Totals		0 Met 1 Partially Met 0 Not Met 0 NA 0UTD
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? <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>Yes, and barriers for first quarter were analyzed. Quarter one was July 1 to September 30, 2017, and youth school programs had limited days of treatment and assessments and staff had summer vacations. In addition, one contractor lost all youth staff in that period. Contracts did have enhanced capacity requirements added for the fiscal year.</p>
<p>8.2 Were the PIP results and findings presented accurately and clearly? Are tables and figures labeled? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 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>Data was accurate but discouraging. Providers did not deliver required assessment and service visits due to a variety of factors discussed above.</p>

<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: ___Quarterly_____</p> <p>Indicate the statistical analysis used: __Percent Reduction_____</p> <p>Indicate the statistical significance level or confidence level if available/known: __10___% _____Unable to determine</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	<p>First quarter was discouraging but analysis indicated gaps in assessment slots due to a variety of factors.</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></p> <p><i>Conclusions regarding the success of the interpretation:</i></p> <p><i>Recommendations for follow-up:</i></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	
Totals		2 Met 2 Partially Met 0 Not Met 0 NA 0 UTD
STEP 9: Assess Whether Improvement is “Real” Improvement		
<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 type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Unable to Determine	<p>Not able to determine, only one quarter available.</p>
<p>9.2 Was there any documented, quantitative improvement in processes or outcomes of care?</p> <p>Was there: <input type="checkbox"/> Improvement <input checked="" 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 type="checkbox"/> Met <input type="checkbox"/> Partially Met <input checked="" 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 checked="" type="checkbox"/> Small <input type="checkbox"/> Fair <input type="checkbox"/> High</p>	<p><input type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Unable to Determine</p>	
<p>9.4 Is there any statistical evidence that any observed performance improvement is true improvement?</p> <p><input type="checkbox"/> Weak <input type="checkbox"/> Moderate <input type="checkbox"/> Strong</p>	<p><input type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> Unable to Determine</p>	Only one quarter, uncertain.
<p>9.5 Was sustained improvement demonstrated through repeated measurements over comparable time periods?</p>	<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>	
Totals		0 Met Partially Met 1 Not Met 1 NA 3 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	Too early one quarter data

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

Good overall design but must track actual capacity increases and implement the Yellow Schedule centralized intake intervention to determine effectiveness of PIP in meeting timeliness goals and CANS functioning goals.

Recommendations:

Continue PIP; add intervention of Yellow Schedule, share quarterly data with lead reviewer to ensure PIP achieves needed analysis.

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