

PERFORMANCE IMPROVEMENT PROJECT (PIP) VALIDATION WORKSHEET FY17-18

CLINICAL PIP

GENERAL INFORMATION

MHP: Tuolumne

PIP Title: Engaging Clients through the Intake and Assessment Process

Start Date (MM/DD/YY): October, 2015

Completion Date (MM/DD/YY): January, 2018

Projected Study Period (#of Months): 26 Months

Completed: Yes No

Date(s) of On-Site Review (MM/DD/YY): 03/27/2018

Name of Reviewer: Saumitra SenGupta

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 Clinical PIP was submitted

Brief Description of PIP (including goal and what PIP is attempting to accomplish): The MHP experienced high no show rates for initial assessment appointments. Through this PIP, the MHP worked to reduce the time to initial assessment, and examine if that would lead to lower no-show rates and also improve the beneficiaries' hope in the recovery process.

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	The MHP engaged a wide range of staff and supervisors, including the members of the Quality Improvement Council with peer members.
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	The MHP discovered the issue from monitoring of no-shows, analyzing timeliness of initial assessment, and discussing the intake schedules and staffing capacity.
Select the category for each PIP: <i>Clinical:</i> <input checked="" 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 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	The MHP employed various interventions, both administrative and clinical, to ensure timely appointments for initial assessment and continued monitoring to improve the access experience for all new consumers.
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 type="checkbox"/> Age Range <input type="checkbox"/> Race/Ethnicity <input type="checkbox"/> Gender <input type="checkbox"/> Language <input checked="" type="checkbox"/> Other	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	The PIP was limited to new beneficiaries seeking services. All new beneficiaries were part of the revised protocol and received the planned interventions.
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 decreasing wait time to initial assessment to 21 days and increasing client contacts help to decrease no-show rates to 20 percent and increase hope in the recovery process (as measured by the HOPE scale)?</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	
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 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	The PIP was applicable to all new enrollees seeking services from the MHP.
<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 checked="" type="checkbox"/> Referral <input type="checkbox"/> Self-identification <input type="checkbox"/> Other: <Text if checked> </p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	The MHP used the initial contact data from its EHR to identify the study population, and then utilized the subsequent contacts and interventions to fully capture the study data.
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></p> <ol style="list-style-type: none"> Timeliness from Initial Contact to first offered Initial Assessment, Percentage Meeting 21-day Goal No-Shows to Initial Assessment HOPE Scale Data 	<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 checked="" type="checkbox"/> Functional Status</p> <p><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 type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input checked="" type="checkbox"/> Met</p> <p><input type="checkbox"/> Partially Met</p> <p><input type="checkbox"/> Not Met</p> <p><input type="checkbox"/> Unable to Determine</p>	<p>This PIP aims to improve hope for recovery using Snyder’s HOPE scale, which is used in various health and human services studies.</p>
Totals		<p>2 Met 0 Partially Met 0 Not Met 0 UTD</p>
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?</p> <p>b) Confidence interval to be used?</p> <p>c) Margin of error that will be acceptable?</p>	<p><input type="checkbox"/> Met</p> <p><input type="checkbox"/> Partially Met</p> <p><input type="checkbox"/> Not Met</p> <p><input checked="" type="checkbox"/> Not Applicable</p> <p><input type="checkbox"/> Unable to Determine</p>	<p>The MHP made this PIP’s interventions available to all new beneficiaries, and given the small size of the MHP’s beneficiary numbers, sampling was not applicable.</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> <p><Text></p>	<p><input type="checkbox"/> Met</p> <p><input type="checkbox"/> Partially Met</p> <p><input type="checkbox"/> Not Met</p> <p><input checked="" type="checkbox"/> Not Applicable</p> <p><input type="checkbox"/> Unable to Determine</p>	
<p>5.3 Did the sample contain a sufficient number of enrollees?</p> <p>_____ N of enrollees in sampling frame</p> <p>_____ N of sample</p> <p>_____ N of participants (i.e. – return rate)</p>	<p><input type="checkbox"/> Met</p> <p><input type="checkbox"/> Partially Met</p> <p><input type="checkbox"/> Not Met</p> <p><input checked="" type="checkbox"/> Not Applicable</p> <p><input type="checkbox"/> Unable to Determine</p>	
Totals		<p>0 Met 0 Partially Met 0 Not Met 3 NA 0 UTD</p>

STEP 6: Review Data Collection Procedures		
<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	<p>Snyder's Hope Scale was inserted at 3 distinct times during the client engagement experience: Pre: Initial Contact, Mid: Initial Assessment, and Post: Discharge.</p> <p>Client contacts were collected via the E.H.R. All client contacts will be collected such as Initial Contact, Triage, Access/Coordination, Appointment Reminder Calls, Client Support, Plan Development, Initial Assessment.</p> <p>The key timeliness indicator was measured from initial contact to initial assessment.</p> <p>Beneficiary Satisfaction is collected via the POQI survey 2x/year, ongoing (MHSIP Survey questions).</p>
<p>6.2 Did the study design clearly specify the sources of data?</p> <p><i>Sources of data:</i></p> <p><input type="checkbox"/> Member <input checked="" type="checkbox"/> Claims <input type="checkbox"/> Provider</p> <p><input checked="" type="checkbox"/> Other: HOPE Scale and MHSIP</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	<p>All timeliness and HOPE data came from the EHR, the satisfaction data from the MHSIP survey.</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>See 6.1</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> <p><input checked="" type="checkbox"/> Survey <input checked="" type="checkbox"/> Medical record abstraction tool</p> <p><input checked="" type="checkbox"/> Outcomes tool <input type="checkbox"/> Level of Care tools</p> <p><input type="checkbox"/> Other: <Text if checked></p>	<input type="checkbox"/> Met <input checked="" type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	<p>One limitation to consistent and accurate data collection process was who could be included in the analysis of HOPE scale data, i.e., only those with at least two data points.</p>

<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 MHP provided a systematic data collection and analysis plan, specifying data collection timeline for each data element, and the type of analysis to be performed.</p> <p>The MHP addressed its initial contingencies regarding the frequency of HOPE data collection by introducing multiple data collection points to accommodate individual beneficiary's pace of treatment processes.</p>
<p>6.6 Were qualified staff and personnel used to collect the data?</p> <p><i>Project leader:</i> Name: Sarah Lambie Title: QI Coordinator Role: Project Coordinator</p> <p><i>Other team members:</i> Names: Lindsey Lujan, QI Data Analyst</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	
Totals		5 Met 1 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?</p> <p><i>Describe Interventions:</i></p> <p>Launching the Initial Contact Form</p> <p>Launching the Access/Coordination Service Code</p> <p>Adding Initial Assessment Appointments to the schedule</p> <p>HOPE “Inspiring Strategies” Training</p> <p>Implementing the Snyder Hope Scale</p> <p>Brief Action Planning (BAP) Training</p> <p>Implementation of Case Assignment in the CAIP unit</p> <p>QA and prompt access/coordination contacts between Initial Request and Initial Assessment</p> <p>QA “Follow-Up Binder”</p> <p>Case Management Supervision</p> <p>Motivational Interviewing (MI) Training</p>	<input checked="" type="checkbox"/> Met <input type="checkbox"/> Partially Met <input type="checkbox"/> Not Met <input type="checkbox"/> Unable to Determine	<p>The MHP did an excellent job of breaking down the overarching interventions into specific tasks.</p>
Totals		1 Met 0 Partially Met 0 Not Met 0 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>HOPE data collection process was changed from Pre/Mid/Post-intervention to first three data collection points to maximize the number of beneficiaries who could be included in the data analysis, as well as to eliminate certain variations in data collection.</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: _____</p> <p>Indicate the statistical analysis used: _____ Pre-Post comparison. correlation _____</p> <p>Indicate the statistical significance level or confidence level if available/known: _____ percent ___X___ 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>One of the significant limitations of this study was the fact that it was not possible to do a matched group comparison because of the way the waves of data collection took place. However, the group averages in the HOPE scale showed improvements in the post-intervention period.</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> <Text></p> <p><i>Conclusions regarding the success of the interpretation:</i> The improvements were significant.</p> <p><i>Recommendations for follow-up:</i> <Text></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>The analysis findings included examination of the success of the PIP. The follow-up activities were implied, but not fully discussed.</p>
Totals		3 Met 1 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> <i>Were the same sources of data used?</i> <i>Did they use the same method of data collection?</i> <i>Were the same participants examined?</i> <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>Different groups were examined at different data collection points, although there were common beneficiaries across groups.</p>

<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 Statistical significance: <input type="checkbox"/> Yes <input type="checkbox"/> No 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>CalEQRO could not determine the statistical significance of the findings, which appeared robust.</p>
<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> <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 type="checkbox"/> Moderate <input checked="" type="checkbox"/> Strong</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 MHP presented correlational findings to establish true improvement.</p>
<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	<p>All indicators need to be monitored for future quality improvement purposes.</p>
Totals		5 Met 0 Partially Met 0 Not Met 0 NA 0 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 type="checkbox"/> No	

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

Conclusions:

The study established with reasonable certainty that timely initial intake, and engagement during the intake process, result in higher beneficiary hope for recovery from mental illness, as well as greater satisfaction with the services.

Recommendations:

Continue monitoring the study indicators for continuous quality improvement purposes, and for establishing that sustained improvements occurred as a result of the PIP.

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