



## Behavioral Health Integration Complex Care Initiative

# Status Summary Report



**Roadmap Status Summary Report  
UCSD Health Service Research Center**

**July 18, 2016**

## Executive Summary

The Roadmap was developed by the Jen Clancy Consulting (JCC) team for IEHP and participating organizations to support fundamental practice transformation changes for the *Behavioral Health Integration Complex Care Initiative* (BHICCI). The BHICCI Roadmap identifies goals, strategies, and activities as concrete, actionable steps to support organizations' capacity to function as whole health homes.

Practice changes are conceptualized as steps within three phases for practice transformation: Foundation for Improvement, Developing Complex Care Systems/Whole Health Homes and Sustaining Changes.

The purpose of this report is to describe organizations' progress on the Roadmap during the planning and early implementation phase of BHICCI. Overall, all of the organizations participating in the BHICCI have started the implementation phase of at least some of the practice change goals. As the initiative continues, it is anticipated that organizations will move from the "not started" and "implementation phase" on these goals to "practice change made."



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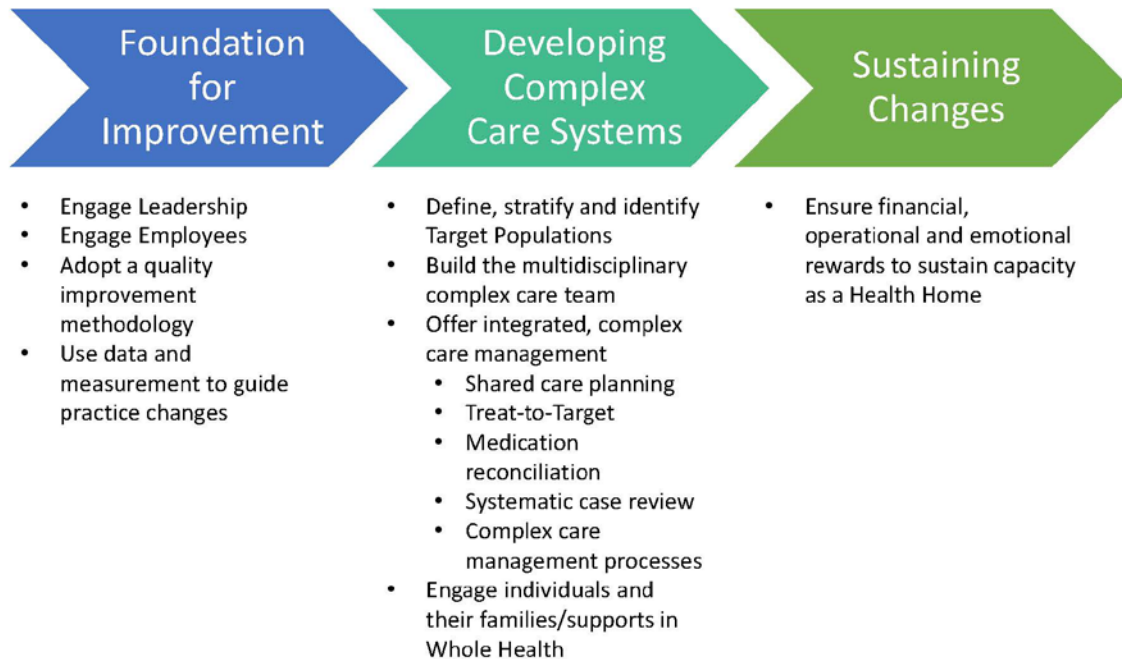
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## BHICCI Roadmap

The Roadmap was developed by the Jen Clancy Consulting (JCC) team for IEHP and participating organizations to support fundamental practice transformation changes for the *Behavioral Health Integration Complex Care Initiative* (BHICCI). The BHICCI Roadmap identifies goals, strategies, and activities as concrete, actionable steps to support organizations' capacity to function as whole health homes.

Practice changes are conceptualized as steps within three phases for practice transformation: Foundation for Improvement, Developing Complex Care Systems/Whole Health Homes and Sustaining Changes.



While the goals and practice changes described in the Roadmap are not strictly sequential, leadership who supports an organizational culture that is committed to quality and providing whole person health care, which includes attention to employee engagement and wellness and using tools for quality improvement, provides the foundation that is necessary to sustain enhancements to the service system. It is understood that there will be some local variation in how key practice changes are implemented, which reflects variation and differences related to size, organizational complexity and available resources.

**The purpose of this report is to describe organizations' progress on the Roadmap during the planning and early implementation phase of BHICCI. Information described in this report is based on Team Reports submitted in April 2016, responses to the baseline BHICCI Site Self-Assessment and qualitative interviews with the practice coaches conducted in June 2016. Using these sources of data, evaluation team members coded progress for each BHICCI practice change goal listed on the Roadmap as "not started or not included in report," "implementation phases," or "practice change made." Coding within the implementation phase includes any key activities that were described as being planned or tested.**

## Organizations Participating in BHICCI

Since a goal of BHICCI is system transformation, participating organizations represent a diverse range of safety net clinics in San Bernardino and Riverside Counties. A total of 29 hospital-based clinics, primary care clinics, behavioral health and substance abuse treatment sites, community-based adult services center, assisted living settings, a children's clinic and pain management clinics, representing 13 health care organizations are participating in BHICCI. The participating organizations include Arrowhead Regional Medical Center (ARMC), Borrego Community Health, Desert Clinic Pain Institute, MFI Recovery Center, Orchid Court, Riverside University Health System (RUHS) Family Care Centers, Riverside University Health System (RUHS) Behavioral Health, Riverside University Health System (RUHS) Medical Center, San Bernardino Adult Day Health Care (ADHC), San Bernardino County Department of Behavioral Health, San Bernardino Public Health, Social Action Corps Health System and Telecare Corporation. A brief description of each organization currently participating in BHICCI with data included in this report is provided below.

### 1. Arrowhead Regional Medical Center (ARMC)

ARMC is a 456-bed university-affiliated teaching hospital licensed by the State of California Department of Public Health and operated by the County of San Bernardino. ARMC operates a regional burn center, a primary stroke center, a behavioral health center located on the hospital campus, four primary care centers including three family health centers, and provides more than 40 outpatient specialty care services. The family health centers participating in BHICCI include **Fontana Family Health Clinic**, **McKee Family Health Clinic**, and **Westside Family Health Clinic**. These clinics provide a patient-centered medical home model of care that fosters a relationship between patients and their health care providers. Primary care services offered to individuals and families in all age groups. Available services include: adult care (acute or chronic), geriatrics, preventive and wellness care, education including diabetes, obesity and stroke, OB/GYN, pediatrics, including well-child physicals and immunizations, referrals to medical specialists, specialized diagnostic and minor surgery procedures, some clinics behavioral health services.

### 2. Borrego Health

Borrego Health is a non-profit 501(c)(3) Federally Qualified Health Center (FQHC) and a Federal Tort Claims Act Deemed (FTCA) facility operating in San Diego and Riverside counties. Borrego Health tailors primary and preventive health programs to meet the health needs of men, women, children, adolescents and senior citizens in our surrounding communities, and those at risk of developing serious diseases such as diabetes. **Centro Medico Cathedral City**, the Borrego Health clinic that participates in BHICCI, provides *medical services* (family practice, pediatric services, OB/GYN, urgent care, behavioral health, internal medicine, dermatology, ophthalmology, cardiology, and pediatric dental), *ancillary services* (referral services to specialists, laboratory services, EKG's, telemedicine, digital radiology, pharmacy, orthopedic technologist on site), *enabling services* (transportation services, translation services, application assistance, social services, health education, and nutrition counseling), and *preventive care*

(cancer screening, well child exams, immunizations, comprehensive perinatal services, family planning).

### 3. Desert Clinic Pain Institute

Desert Clinic Pain Institute is a full service pain management practice with three convenient locations throughout the Coachella Valley: **Indio Clinic, Palm Springs Clinic, and Rancho Mirage Clinic**. The clinics treat various pain conditions and offer: evaluation and consultation, pain medication analysis and management, interventional injection therapies, motor vehicle injury, neuromodulation, intrathecal pump therapy, worker's compensation services, electromyography and nerve conduction studies, kyphoplasty, MILD procedure, and clinical research studies.

### 4. MFI Recovery Center

Established in 1972, MFI Recovery Center is a CARF accredited, non-profit corporation dedicated to providing quality, affordable mental health and substance abuse treatment programs for men, women, women with children, and adolescents. MFI Recovery Center's **Riverside Outpatient Treatment Center** location, which is included in BHICCI, offers Outpatient Drug Free Program, Intensive Outpatient Program, Adolescent Substance Abuse Treatment (MDFT-Multi-Dimensional Family Therapy), Mental Health Counseling & Medication Management, Family, Individual & Couples Counseling, and Women's Partial Hospitalization (Day Treatment).

### 5. Orchid Court

**Orchid Court Board and Care Center**, located in San Bernardino, is a licensed care provider with the State of California. The facility assists referred mentally ill adults between the ages of 18 to 59 years old, recovering from mental illness and substance abuse disorders to successfully transition from locked facilities to community living. Orchid Court provides 24/7 residential enhanced services designed to meet the physical, psychiatric, emotional, and social needs of the residents. Additionally, facility provides 24-hour structured supervision, recreational opportunities, necessary transportation, as well as coordination of services and treatments

### 6. Riverside University Health System Department of Behavioral Health

Riverside University Health System – Behavioral Health provides community-based services for adults and children with mental health and substance use challenges. **Lake Elsinore Adult Mental Health Clinic**, and **Rustin Wellness Center Recovery** participate in BHICCI. The mental health program provides treatment and support services to transition age youth, adults and older adults who have a mental illness and children who are seriously emotionally disturbed. Services include outpatient services, medication, peer recovery services, education, housing, residential care, as well as subacute and acute care. The substance use program provides accessible, high quality substance abuse treatment for all ages through a wide range of countywide clinics and contract providers.

## 7. Riverside University Health System Regional Medical Center

Riverside University Health System – Medical Center is a full-service hospital that offers a wide variety of care options such as occupational and physical therapy, complete clinical laboratory testing, pulmonary treatment, and diagnostic services. RCRMC also specializes in pediatric, obstetric, and gynecological care. As a teaching hospital, RCRMC serves as a clinical site for more than 60 clinics, providing specialized care in areas such as diabetes, endocrinology, infectious disease, orthopedics, and surgery.

## 8. San Bernardino Adult Day Health Care (ADHC)

San Bernardino **Adult Day Health Care Center** is a California licensed adult day care facility managed by Catleya Health Services, Inc., that provides Community Based Adult Services (CBAS) designed to support adults with complex needs and who are physically and mentally challenged. CBAS aims to maintain these individuals in the community to avoid costly institutional and emergency care. ADHC/CBAS provides an organized daily program of health, social and therapeutic activities. Services such as skilled nursing care, maintenance physical, occupational therapies, as well as other services are individually tailored based on each person-centered care plan. Transportation, as well as nutritionally balanced meals, are provided. Additionally, a teacher from Inland Career Education Center (Adult School) is on site when school is open. To be eligible for CBAS, a beneficiary must meet existing ADHC medical necessity criteria as well as CBAS eligibility criteria. An initial in-person evaluation by the Medi-Cal Managed Care Plan or the State's Medi-Cal Field Office prior to assessment and admission is likewise mandated.

## 9. San Bernardino County Department of Behavioral Health

The County of San Bernardino Behavioral Health Programs strive to be recognized as a progressive system of seamless, accessible and effective services that promote prevention, intervention, recovery and resiliency for individuals, families and communities. **Adult Residential Services (ARS)**, a program within San Bernardino County Department of Behavioral Health, takes part in the BHI Initiative. ARS arranges placement and provides case management services for mentally ill consumers who require higher and more structured levels of care following hospitalization. Services are designed to move consumers to the least restrictive levels of care as quickly as possible. Case management services are provided at state hospitals, IMDs, and Augmented Board and Care facilities.

## 10. Social Action Corps Health System (SACHS)

SAC Health System is a non-profit community health care corporation serving the Inland Empire. SACHS provides a full range of medical, dental and behavioral health services for all, but primarily for uninsured patients and their families. SACHS's **Norton Clinic**, which participates in BHICCI, provides primary care, behavioral health, dental care, and a family resource center.

## 11. Telecare Corporation

Telecare is a family- and employee-owned company specializing in innovative, outcome-driven services for high-risk individuals with complex needs. Telecare's spectrum of services includes community-based, acute, crisis, residential and longer-term recovery programs. **Telecare's Inland Empire Coordinated Care (TIE-CC)** program, which participates in BHICCI, provides services for adults with serious mental health conditions, as well as co-occurring physical health and substance use issues. The TIE-CC program is funded by IEHP and provides an array of services, including: screening and intervention for common mental health, substance use, and physical health conditions, providing assistance with housing and psychiatric services, problem solving treatment, education groups, substance use counseling, and referrals to community-based drug and/or alcohol treatment.

### Describing Progress

BHICCI recognizes that participating health care organizations have been providing services for many years in the community and have developed many successful practices. Each organization is unique and has existing strengths and experiences to build from, and is at a different stage of readiness for change. Additionally, some organizations participating in BHICCI have prior experiences providing integrated care or complex care management, so variability is expected.

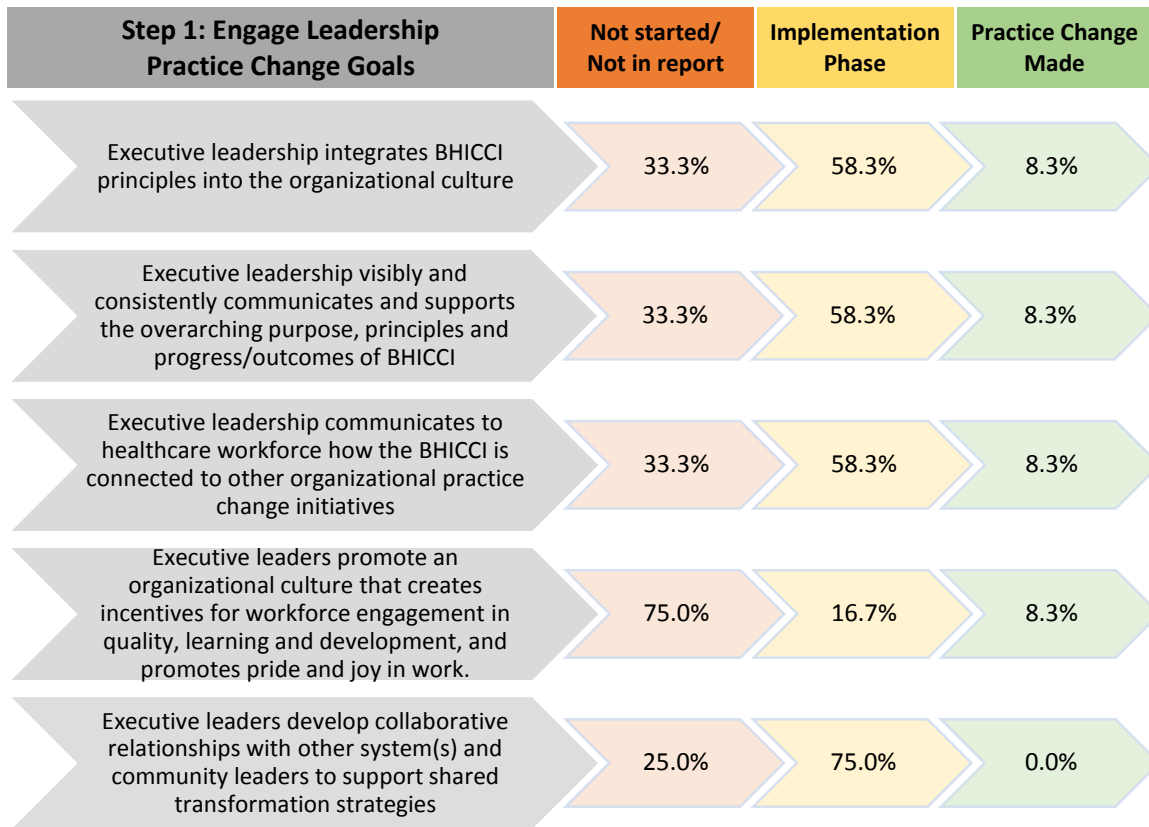
### Phase I: Foundation for Improvement

The first phase of the Roadmap includes engaging leadership and employees and adopting a methodology for quality improvement.

#### Step 1: Engage Leadership

The first step on the Roadmap focuses on engaging leadership to build an organizational culture that supports the purpose, principles and outcomes of BHICCI and promotes quality, learning and development and employee engagement.

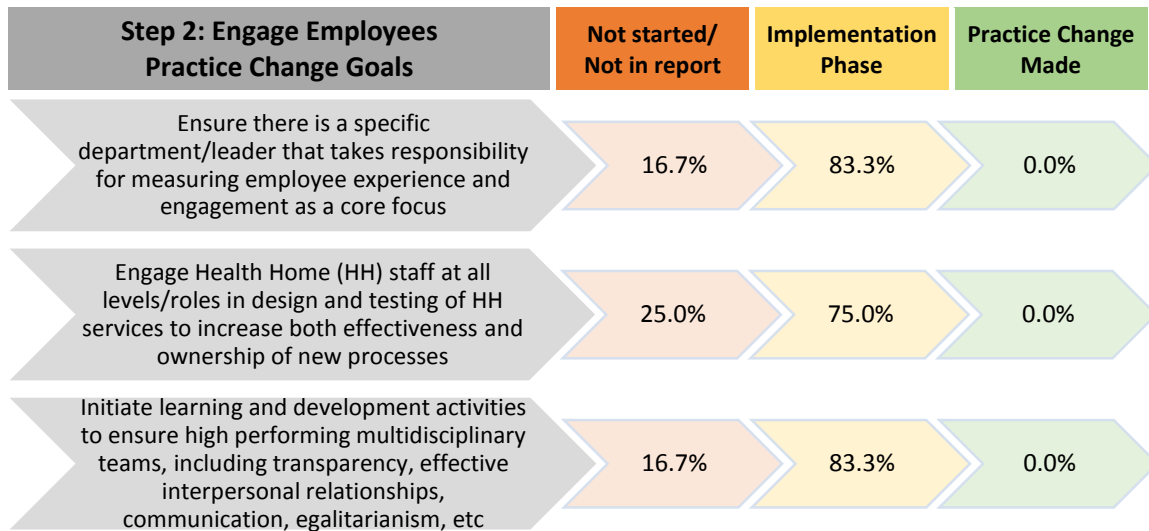




The majority of organizations participating in BHICCI (83.3%) have started implementing or have made practice changes at the executive leadership level (see above chart for summary results). Specifically, more than half of organizations have executive leadership who are working towards integrating BHICCI principles into their organizational culture, and who consistently communicate and support the purpose of BHICCI. There is the most variability in organizations' progress promoting an organizational culture that creates incentives for workforce engagement in quality, learning and development, and promotes pride and joy in work, and developing collaborative relationships with other systems. To date, **Desert Clinic Pain Institute** is the only organization that has made practice changes within this step, while **Borrego Health Center** has implemented every goal of engaging leadership. There are two organizations that have not made any changes to executive leadership's engagement, or did not describe any changes in their team report. During the interview with the practice coach, it was shared that the staff of interns and the team leader at **RUHS Diabetes Specialty Clinic** are engaged in BHICCI, and the practice coach is working with executive leadership to transition from an intern-staffed initiative to a model that hires full time care managers, Behavioral Health clinicians and care coordinators.

**Step 2: Engage Employees**

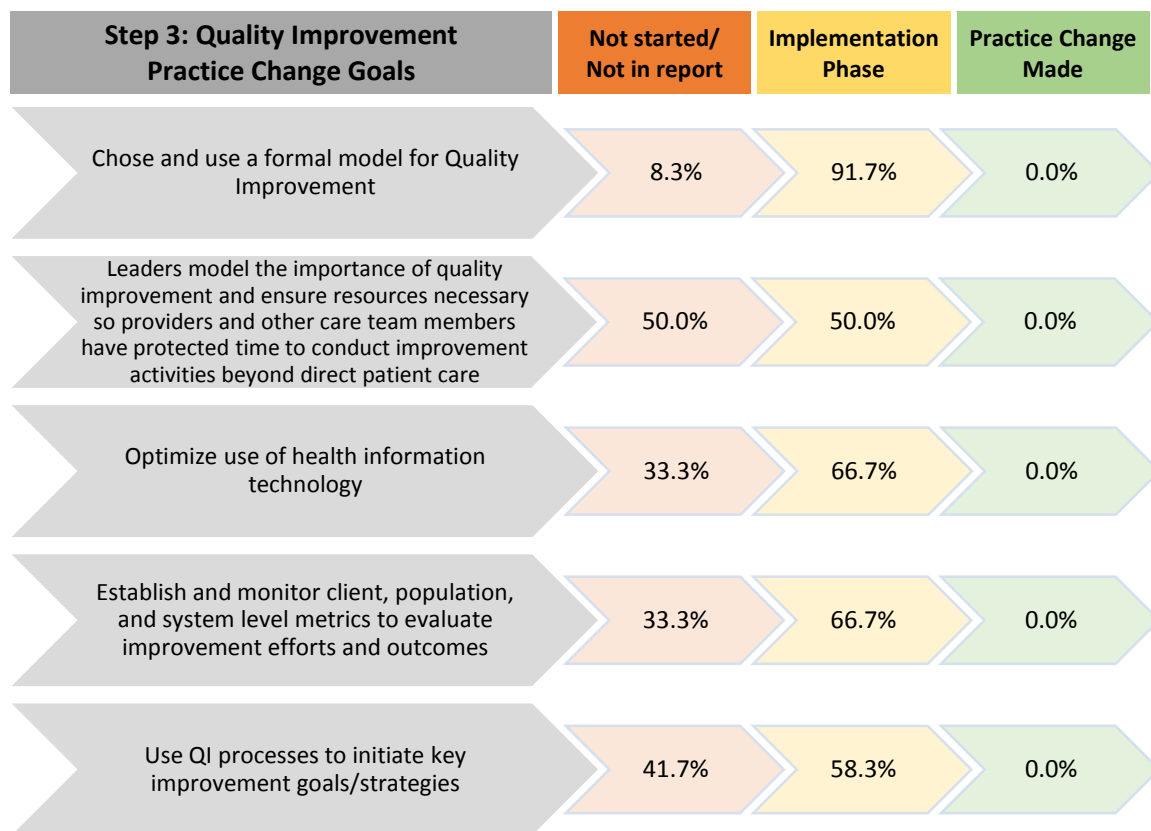
Practice changes on the second step on the Roadmap focus on engaging each employee to ensure effective interpersonal relationships and feeling of ownership over new processes. Employee engagement is also routinely measured and feedback is used to improve organizational culture.



All of the organizations participating in the BHICCI have started implementing at least one of the three employee engagement practice change goals, and half (50.0%) have started implementing all three of them (see above chart for summary results). Receiving approvals for hiring new staff and recruiting the ‘right people’ for the health care team has been a challenge for most organizations. To date, there are several organizations that have not filled key roles within the care team. Despite these challenges, all but two of the organizations (83.3%) have taken steps towards the development of a specific department or leader that measures employee experience and engagement as a core focus. Similarly, all but two of the organizations (83.3%) have started to initiate learning and development activities to ensure high performing multidisciplinary teams. Lastly, three-quarters of the organizations started to engage Health Homes (HH) staff in the design and testing of HH services.

**Step 3: Adopting a Quality Improvement Methodology and Tools**

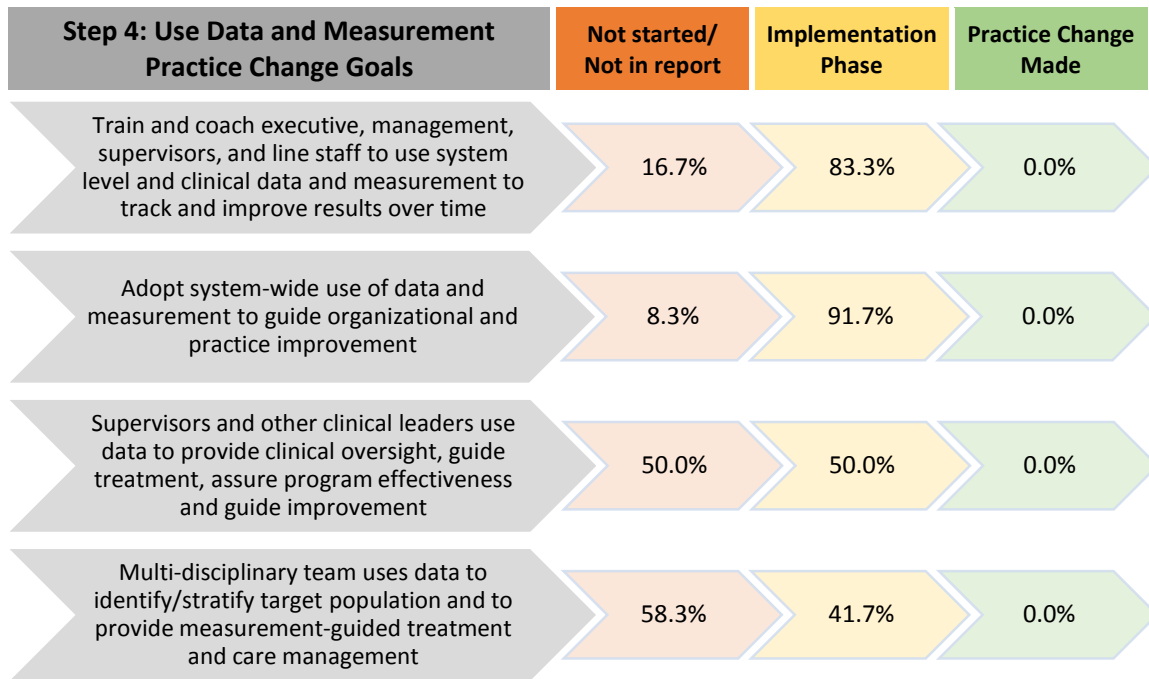
The third step on the Roadmap includes adopting tools and defining processes for ongoing quality improvement.



All of the organizations participating in the BHICCI started implementing at least one of the five employee quality improvement methodology and tools practice change goals (see above chart for summary results), and **San Bernardino Adult Day Health Care, Desert Clinic Pain Institute and Borrego Health Center** are implementing all five QI goals. Almost all of the organizations (91.7%) took steps to select and use a formal model for Quality Improvement. Two-thirds of the organizations started to optimize the use of health information technology, and two-thirds of organizations made progress on establishing and monitoring client, population, and system-level metrics to evaluate improvement efforts and outcomes. Half of the organizations have entered the implementation phase of leadership support for quality improvement, while the other half have not started to implement this phase yet. In their monthly team report, it is evident that **San Bernardino Department Behavioral Health** has adopted QI methodology, but securing Release of Information (ROI) agreements was described as a challenge to starting QI testing of measurement workflows.

**Step 4: Use Data and Measurement to Guide System and Practice Changes**

Practice changes on the fourth step on the Roadmap focus on adopting measurement-based practices system-wide to guide treatment and integrated, complex care management.



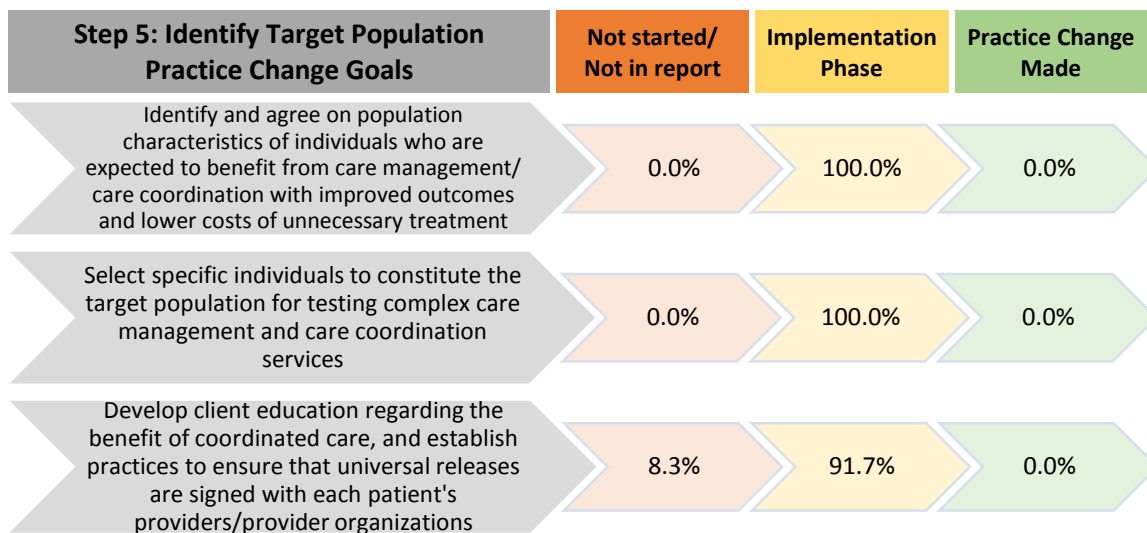
Implementation of at least one of the four practice change goals related to the use of data and measurement has started at all of the organizations participating in the BHICCI (see chart above for summary results). Additionally, three organizations (25.0%) have started to implement all four data and measurement practice change goals. Almost all of the organizations (91.7%) have started using data and measurement to guide organizational and practice improvement, system-wide. Similarly, a majority of the organizations (83.3%) have taken steps to train and coach staff at all levels to use both system and clinical-level data to track and improve results over time. Fewer than half of the sites (41.7%) have a multi-disciplinary team that uses data to provide measurement-guided treatment and care management. It is important to note that only the four organizations (**Borrego Health Center, Orchid Court, San Bernardino Adult Day Center and RUHS Diabetes Specialty Clinic**) who participated in the beta testing phase for the Excel registry have access to the tool. The Excel Registry will be distributed to all organizations on June 30, 2016, but this delay in the release timeline may have impacted organizations' ability to use data for treatment planning.

## Phase II: Complex Care Systems and Whole Health Homes

The second phase of the Roadmap involves the identification of the target population, development of 1) complex care systems, 2) health homes, and 3) multidisciplinary care team, and engagement and support of the client and family members in whole health.

### Step 5: Define, Stratify and Identify Target Population

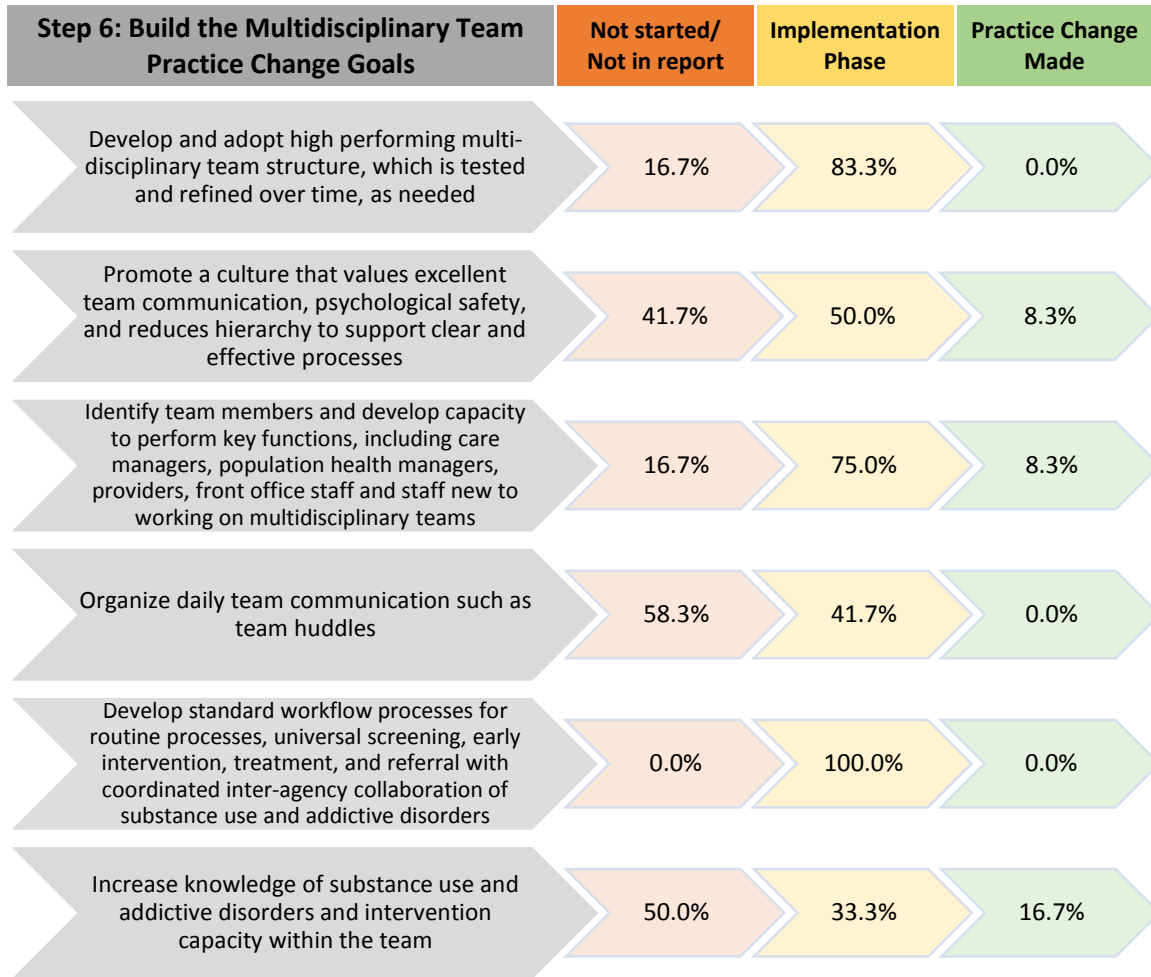
The fifth step on the Roadmap focuses on defining and targeting the population of clients who will benefit the most from integrated, complex care management.



All of the organizations participating in the BHICCI have initiated at least two of the three practice changes related to the development of complex care systems and whole health homes, and all but one (91.7%) have started to implement all three practice change goals (see chart above for summary results). At this point, most of the participating organizations have received ACG reports from IEHP to support the identification of clients who would likely benefit from integrated, complex care management. However, IEHP does not currently have authorization to access client information for the behavioral health organizations (**Telecare Corporation, San Bernardino Department Behavioral Health, Social Action Corps Health System, RUHS Family Wellness Center at Rustin and RUHS Lake Elsinore Adult Mental Health Clinic**), and has not created an ACG report for these sites. While this has been a challenge for the organizations, each site has used alternative methods to identify potential BHICCI clients.

**Step 6: Build the Multidisciplinary, Complex Care Team**

Practice changes on the sixth step of the Roadmap are associated with designing a high performing multi-disciplinary team structure to provide complex care management.

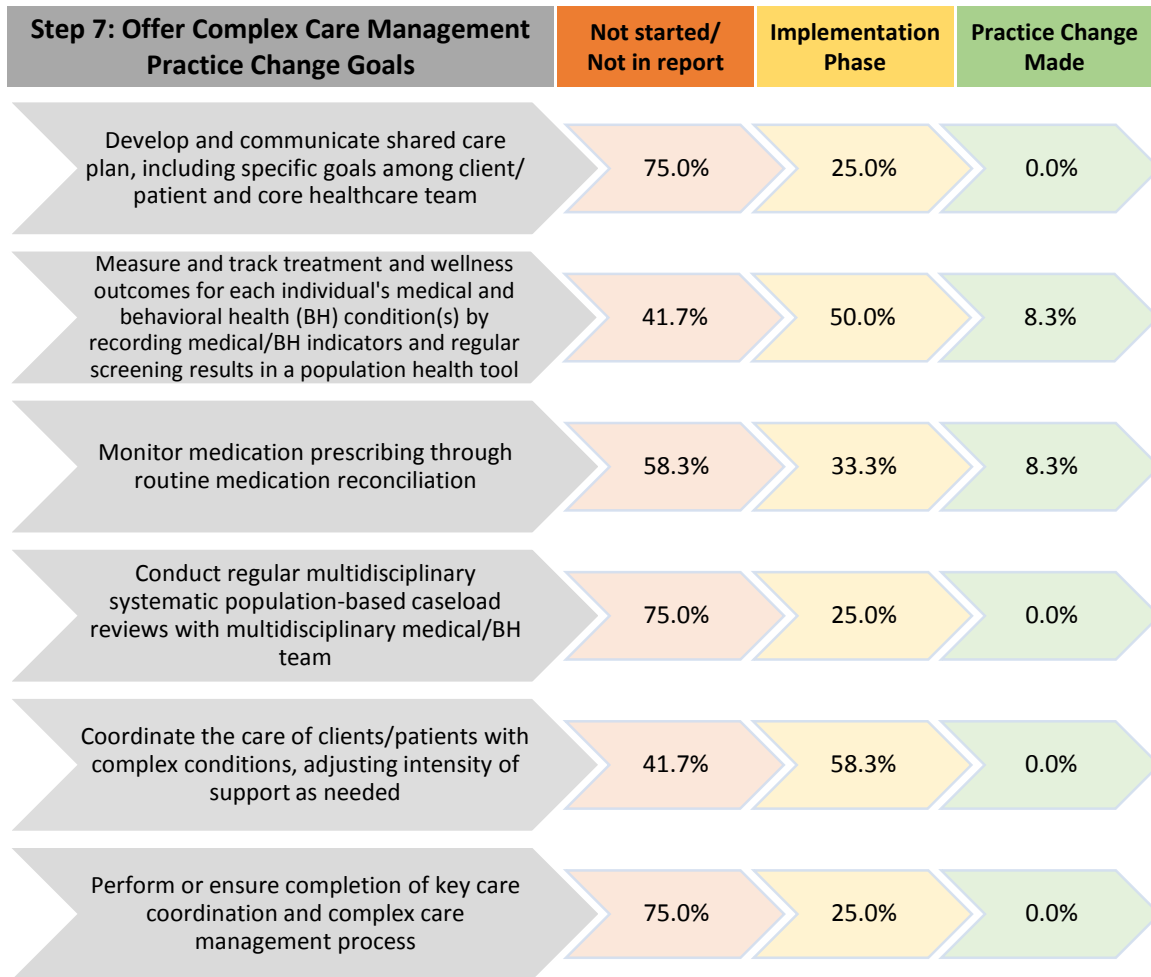


Every organization participating in the BHICCI has initiated implementation of at least two of the six practice change goals necessary to build the multidisciplinary, complex care team (see chart above for summary results). Two organizations (16.7%) started implementation of all six practice change goals, and three organizations made at least one practice change goal (25.0%). This progress is promising given that some organizations are still hiring staff for the health care team.

All organizations started to develop standard workflow processes for screenings, early interventions, treatment and referrals, and a majority of organizations either initiated or made practice changes related to the identification of multidisciplinary team members (83.3%) and/or the development of a high-performing multidisciplinary team structure (83.3%). The majority of organizations have not yet initiated daily team communications (58.3%), and half have not yet increased knowledge of substance use and addictive disorders and intervention capacity within their multidisciplinary team.

**Step 7: Offer Integrated, Complex Care Management**

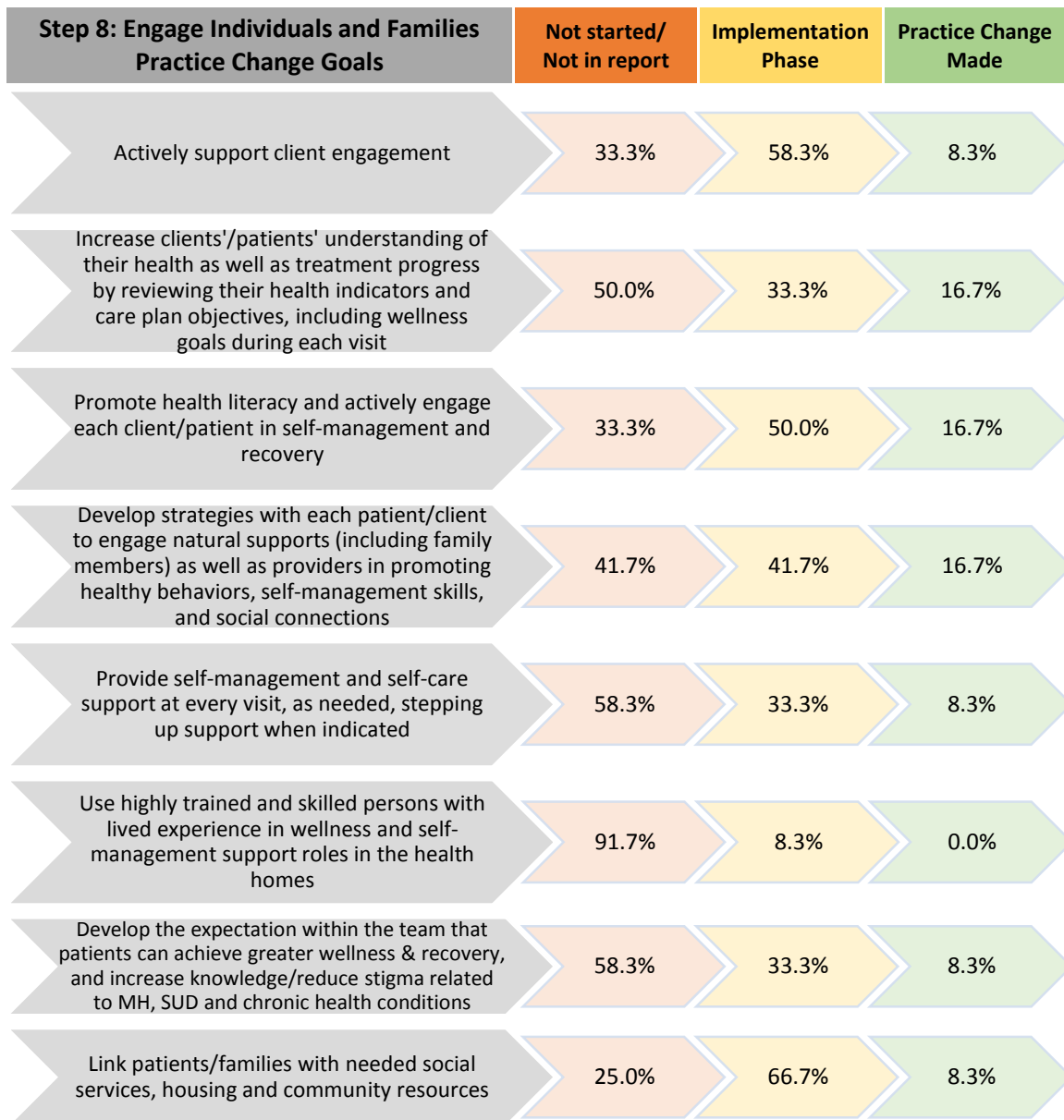
Practice changes on the seventh step of the Roadmap are associated with providing integrated, complex care management, including measurement-based practices, shared care planning, systematic case review, and medication reconciliation.



Implementation towards at least one of the six complex care management practice change goals has been started at all of the organizations participating in the BHICCI, and one organization (8.3%), **Desert Clinic Pain Institute**, has made two of these practice changes (see chart above for summary results). At least half of the organizations have started the process of measuring and tracking screening, treatment, and wellness outcomes for each patient’s medical and behavioral health condition(s) in a population tool (50.0%) and/or began to coordinate the care of patients with complex conditions (58.3%). The majority of organizations have either not started to develop and communicate a shared care plan among the patient and core health care team (75.0%), have not begun to conduct regular systematic population-based caseload reviews with the multidisciplinary team (75%), or have not started to ensure completion of key care coordination and complex care management processes (75.0%).

**Step 8: Engage Individuals and Their Families/Supports in Whole Health**

Step 8 of the Roadmap involves practice changes related to client and family engagement and support in whole health. These changes include promotion of health literacy, support and encouragement of self-management and self-care, and linkage to necessary community resources.



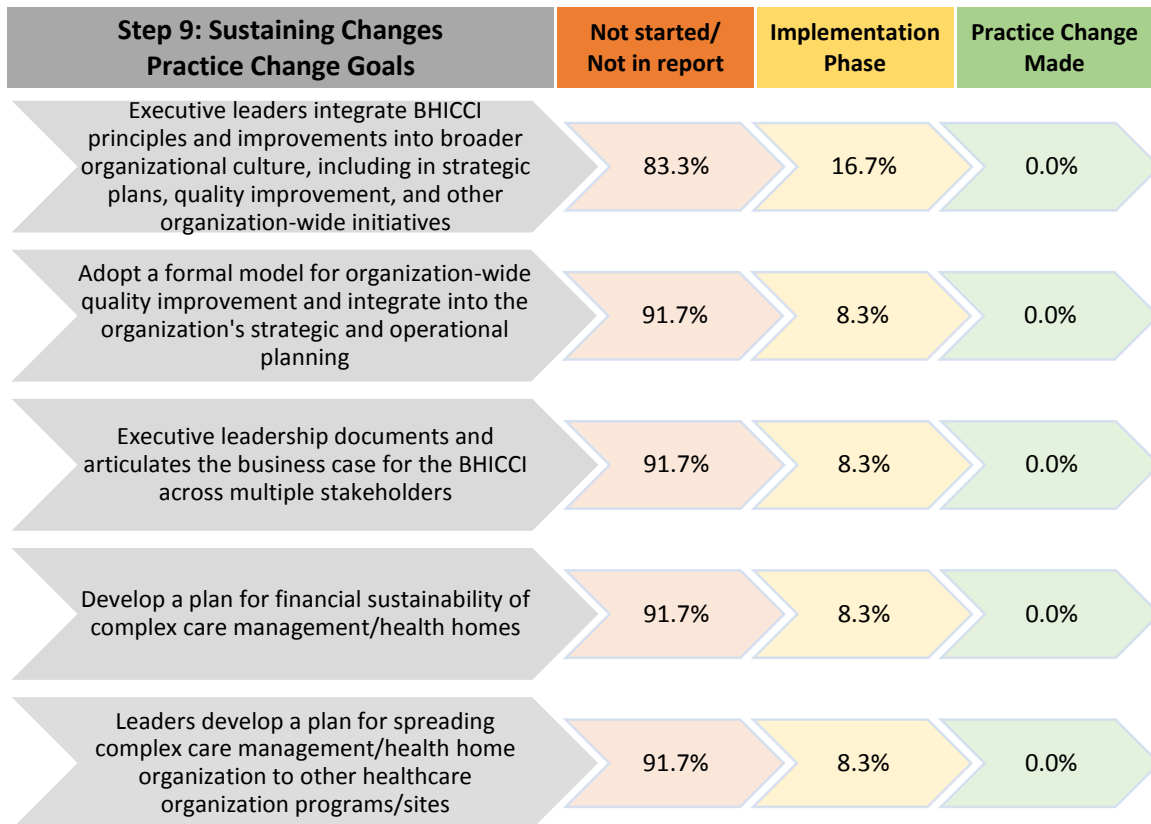
Every organization participating in the BHICCI has made progress towards at least one of the eight practice change goals related to engagement and support of individuals and their families in whole health (see chart above for summary results). Most organizations have not started to use highly trained individuals with lived experience in wellness and self-management support roles in the health homes (91.7%), or this information was not included in the site reports. **RUHS Lake Elsinore Adult Mental Health Clinic** is the exception, and has started engaging clients in whole health activities using Peer Support and Family Specialist staff.



About half of the organizations have either not started to provide self-management and self-care support at every visit (58.3%), and/or initiated steps to develop the expectation within the multidisciplinary team that patients can achieve greater wellness and recovery and increase knowledge/reduce stigma related to mental health, substance abuse disorders, and chronic health conditions (58.3%). Similarly, half of organizations have not taken steps to increase patients' understanding of their health and treatment progress by reviewing their health indicators, care plan objectives and wellness goals during each visit. Many organizations (58.3%) started implementation phase of actively supporting client engagement, and two-thirds of organizations started the implementation phase of linking patients and/or families to needed social services, housing, and community resources (66.7%).

### Phase III: Sustaining Changes

The final phase of the Roadmap involves a plan for sustaining the practice changes implemented and adopted during the first two phases of the Roadmap.



Most organizations participating in the BHICCI have not yet started to implement any of the practice changes related to sustainability, or these were not included in the site reports (see chart above for summary results). **Desert Clinic Pain Institute** is the only organization that has started to implement all of the practice change goals, and two sites (16.7%) have executive leaders that started to integrate BHICCI principles and improvements into their broader organizational culture, such as strategic plans, quality improvement, and other organization-

wide initiatives. However, it is early in the implementation process, and unlikely that many organizations would have made progress sustaining changes at this point.

### **Status Summary**

Overall, all of the organizations participating in the BHICCI have started the implementation phase of at least some of the practice change goals. As the initiative continues, it is anticipated that organizations will move from the “not started” and “implementation phase” on these goals to “practice change made.” As indicated above, many organizations had implemented some of the elements on the Roadmap prior to participation in the BHICCI, so variability on the Roadmap status between organizations is to be expected. Therefore, Roadmap status should be used for descriptive purposes only, and comparisons between or judgments about organizations based on Roadmap status is not recommended.