Quality Management Program Evaluation

Spokane County Regional Behavioral Health
(Administrative Services Organization)
**January – December 2019**

QAPI 2019 Work Plan Summary and Results

The Quality Assessment and Performance Improvement (QAPI) Work Plan is developed by the QAPI Steering Committee, under the direction of the Spokane County Regional Behavioral Health (Administrative Services Organization), SCRBH (ASO), leadership and is reviewed quarterly. The goals identified are based on performance related data and compliance with contract requirements. The QAPI Work Plan and annual Quality Management Evaluation are shared and reviewed with community stakeholders, including the Behavioral Health Advisory Board (BHAB), contracted providers and the Washington State Health Care Authority (HCA).

1. **Efficiently Gather, Report, and Analyze Utilization Management (UM) Data**
   New reports were created for the SCRBH (ASO) to effectively and accurately monitor UM timeliness, denials and length of stays. Delayed data entry dates submitted by providers required adjustments for accurate interpretation of reports. Compliance parameters were met as outlined in contract requirements.

   a. **Length of Stay Reports**
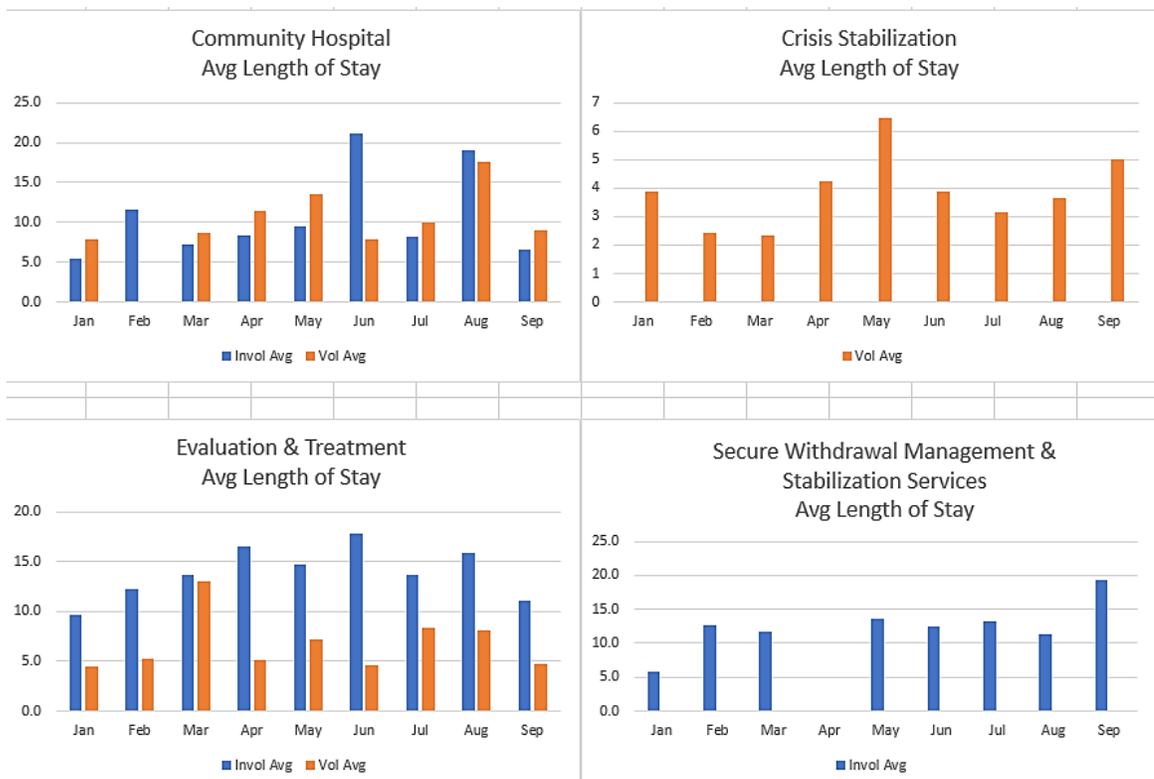
This report details information on the average monthly length of stay for Community Hospitals, Crisis Stabilization, Evaluation & Treatment Centers and Secure Withdrawal Management and Stabilization Services. Involuntary length of stays are compared to voluntary length of stays when applicable. The HCA has not established measurement goals or parameters for length of stay. Data for 2019 provides a baseline to compare with future years and monitor trends.

b. **Authorization and Timeliness Data**

Notification and decision timeliness for authorizations are reviewed on a quarterly basis. The first three quarters for 2019 are combined in the table below. Notifications were all within one (1) hour or less and decisions were executed in less than twelve (12) hours as required by contract for psychiatric inpatient treatment.

January 2019 - September 2019

Facility Type	Notification Timeframe		Decision Timeframe	
	2 hours or less	2+ hours	12 hours or less	12+ hours
Psychiatric Inpatient (Inv)	267	0	262	0
Psychiatric Inpatient (V)	39	0	39	0

c. **Denials and Terminations Data**

Denial Percentages for each month in 2019 ranged from zero percent (0%) up to three percent (3%). Only ten (10) authorizations were denied between January and September.

2. **Create a Crisis Data Dashboard for Stakeholders**

To provide stakeholders a succinct overview of monthly and quarterly data for crisis services in the Spokane Regional Service Area (RSA), a one page dashboard of key performance indicators (KPI) was created. This informational tool was presented at the Spokane Regional Crisis Collaborative (SRCC) on September 20, 2019 for feedback and input. The dashboard includes graphs and tables that monitor and track multiple data sources and provide insights for further dialog. Data includes the number of Individuals served, number of services provided, place of service, investigation outcomes, high utilizers and crisis line performance. The most significant challenge in developing this resource was collecting the required data elements from providers in a timely manner to produce up-to-date and accurate summaries. The next dashboard will be presented

at the SRCC on December 13, 2019 and will continue to be modified to best meet the needs of stakeholders.

3. **Increase Community Awareness of the Regional Crisis Hotline**
    Efforts to create, translate, and distribute information regarding the Regional Behavioral Health Crisis Hotline were initiated in all six counties of the Spokane RSA. Minority groups and rural residents were provided newsletters to increase understanding of crisis resources. Newsletters were distributed to community centers, faith-based organizations, and a variety of public service organizations. They were also posted on community bulletin boards at health clinics, grocery stores and libraries. The newsletter was translated into four (4) of the most commonly used languages in the Spokane Regional Service Area (RSA) including, Spanish, Arabic, Marshallese, and Russian.

4. **Provide Reliable and Timely Customer Care Service**
    The SCRBH (ASO)Customer Care Representatives exceeded performance guidelines per the HCA Contract with a telephone abandonment rate of less than five percent (5%) and response time of less than 30 seconds. Interventions were made at the beginning of the year to have the newly installed phone system ring to both representatives at the same time to improve performance statistics.

5. **Ensure Reliable and Timely Crisis Hotline Response**
    The Regional Behavioral Health Crisis Hotline has received an average of 3,500 calls every month in 2019. The first month of the year had the highest number of calls (3,817) due, in part, to a lack of understanding regarding the purpose of the new hotline. Educational materials were distributed to increase awareness and understanding of how and when to use the hotline. Progress was monitored each month. Reliable and timely service was provided, which far exceeded contract requirements, for both telephone abandonment rate and response time.

	Average % of Abandoned Calls (5% or less)	Average Answer Time (under 30 secs)
Q1	1.5 %	.10 secs
Q2	.6 %	.07 secs
Q3	.4 %	.07 secs

A QAPI Self-Assessment Tool was utilized by the QAPI Committee in November. Scores were tallied and the results showed that the SCRBH (ASO) is effectively incorporating QAPI into the culture of its workplace. The SCRBH (ASO)'s written QAPI Plan contains steps and resources to identify, implement and sustain continuous improvements in 2020. Consumer voice is valued and opportunities to gather input through the Grievance System and Ombuds will be utilized to analyze trends and identify gaps as applicable. QAPI will also seek to increase engagement and communication with advisory boards and behavioral health agencies throughout the year in ongoing improvement processes.