NATIONAL COUNCIL for Mental Wellbeing

CCBHC-E National Training and Technical Assistance Center CCBHC Foundations Data Learning Series Session 3

January 17, 2023

CCBHC-E National Training and Technical Assistance Center

Funded by Substance Abuse and Mental Health Services Administration and operated by the National Council for Mental Wellbeing

Today's Objectives

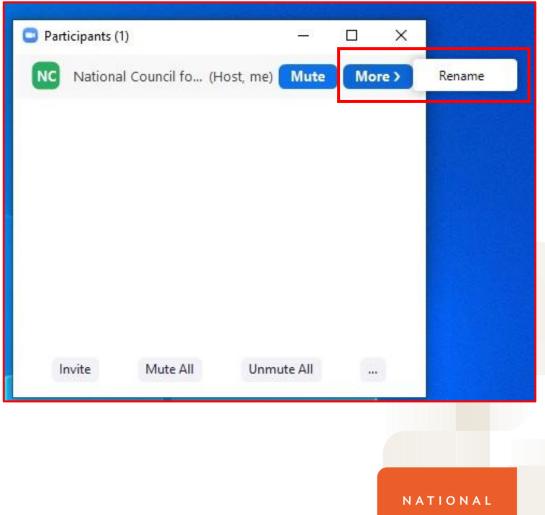
- Review key points from Session 2
- Discuss considerations for designing an effective community needs assessment
- Showcase how needs assessments can inform CCBHC implementation and evaluation

Acknowledgements and Disclaimer

This session was made possible by Grant Number 1H79SM085856 from the Substance Abuse and Mental Health Services Administration (SAMHSA). Its contents are solely the responsibility of the authors and do not necessarily represent the official views, opinions, or policies of SAMHSA, or the U.S. Department of Health and Human Services (HHS).

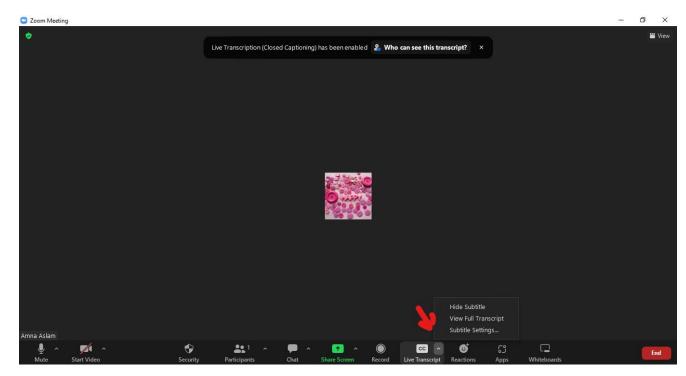
Logistics

- Please rename yourself so your name includes your organization.
 - For example:
 - Blaire Thomas, National Council
 - To rename yourself:
 - Click on the **Participants** icon at the bottom of the screen
 - Find your name and hover your mouse over it
 - Click Rename
- If you are having any issues, please send a Zoom chat message to Kathryn Catamura, National Council



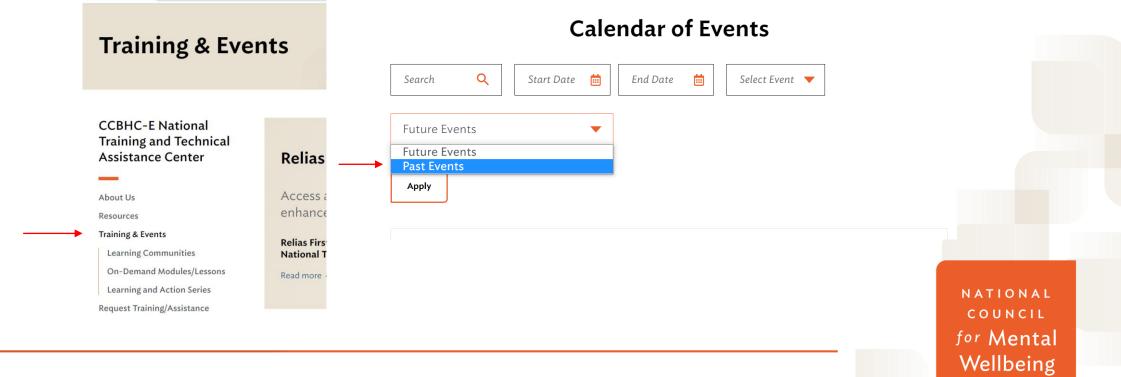
How to Enable Closed Captions (Live Transcript)

Next to "Live Transcript," click the arrow button for options on closed captioning and live transcript.



Today's Session: Slides and Recording

Slides and the session recording link will be available on the <u>CCBHC-E NTTAC website</u> under "Training and Events" > "Past Events" within 2 business days.



Today's Agenda



- Map of Participants
- Session 2 recap
- Designing a Community Needs Assessment
- Case Example
- Sharing and preparing for next session

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Today's Presenters









Jesse Sieger-Walls, MSW, LCSW, PhD Principal and Director of Population Health, TriWest Group

Leigh Fischer, MPH Principal, TriWest Group

Gail Raney, MPA Champaign County CCBHC Project Director, Rosecrance



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Joan Lodge, LCSW/LPHA Winnebago County CCBHC Project Director, Rosecrance

Learning Series Participants



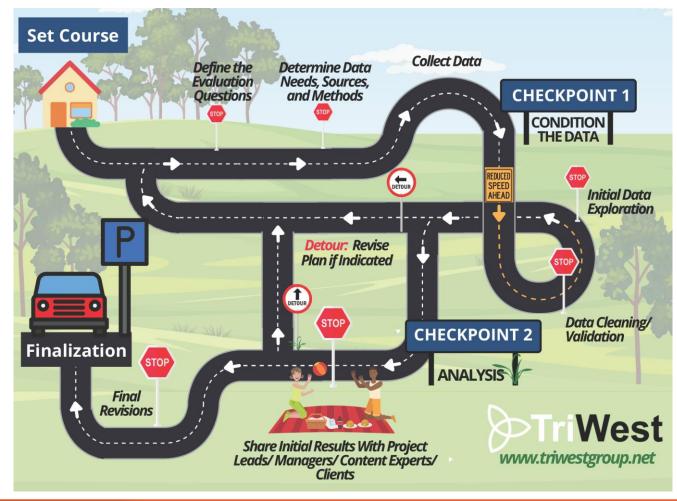
Learning Series Curriculum

Month	Торіс
Nov 2022	Orientation and Attestation
Dec 2022	Building Infrastructure for Data Collection, Analysis, Reporting, and Continuous Quality Improvement
Jan 2023	Designing an Effective Community Needs Assessment
Feb 2023	Building Infrastructure and Practices for NOMs Data Collection, Analysis, and Reporting
Mar 2023	Building Infrastructure for Population Health Management and Risk Stratification
Apr 2023	Review and Wrap-Up

Session 2 Recap: Steps for Building Data Infrastructure

- 1. Identify your data team members and other interested parties. Establish roles.
- 2. Define evaluation questions
- 3. Determine data needs and sources
- 4. Develop data collection methods
- 5. Draft a plan and workflows/protocols for data collection and analysis
- 6. Pilot workflows. Identify areas for improvement as needed

Data-Driven Project Roadmap



Purposes of a Community Needs Assessment

- Identify needs, current conditions, and desired services or outcomes in the community
- Assess program capacity to meet the needs of the population to be served
- Examine internal and external factors that affect access to and quality of care
- Align evidence-based practices, services, and organizational policies (e.g., training and staffing) with the community's needs
- Identify opportunities to increase access and engagement to reduce behavioral health disparities

Elements of a Needs Assessment

Description of the service area (e.g., physical boundaries and size of the service area, service sites)	Prevalence of mental health and substance use conditions and related needs	Economic factors and social determinants of health affecting access to services	Cultures and languages in the service area
Identification of the underserved population(s)	Description of how the staffing plan does and/or will address findings	Plans to update the community needs assessment every 3 years	Input from consumers & family members, care coordination partners, & other key informants

Methodology

Establish a team to conduct the needs assessment

- Discuss purpose and audience
- Develop evaluation questions
- Establish timeline (SAMHSA timeline for PDI grantees: within first 6 months of award, updated within 3 years)

Identify your data sources

- Quantitative
- Qualitative

Develop tools (e.g., interview questions, focus group guides)

Analyze data, and synthesize results

Data Sources

Quantitative

- Publicly available estimates describing behavioral health conditions, including co-occurring physical health conditions and other factors related to recovery
- Internal and external service utilization data
- Self-report data from clients and staff (i.e., functioning; satisfaction; etc.)

Qualitative

- Internal and external key informants/stakeholders, including input from consumers and family members
- Organizational documents and community-level reports

Key Informants

- Consumer and family members
- Community based organizations
- Refugee programs
- Veterans programs
- Domestic violence programs
- Recovery organizations
- Faith leaders/groups

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Example: Collect and Analyze Data

Domain	Evaluation Questions	Data Sources and Methods
Cultural and linguistic needs	What are the cultural and linguistic needs in the CCBHC service area? To what extent is the agency meeting the cultural and linguistic needs in the community?	 Population-level estimates review U.S. Census data American Community Survey data Internal document review Client demographic data Training curricula Standard operating procedures related to interpreter services Review of agency marketing/communication materials External document/report review Review of other recent community needs assessments Interviews/focus groups Consumers Intake and program staff Other provider agencies Community based organizations and community members

Report and Use Results

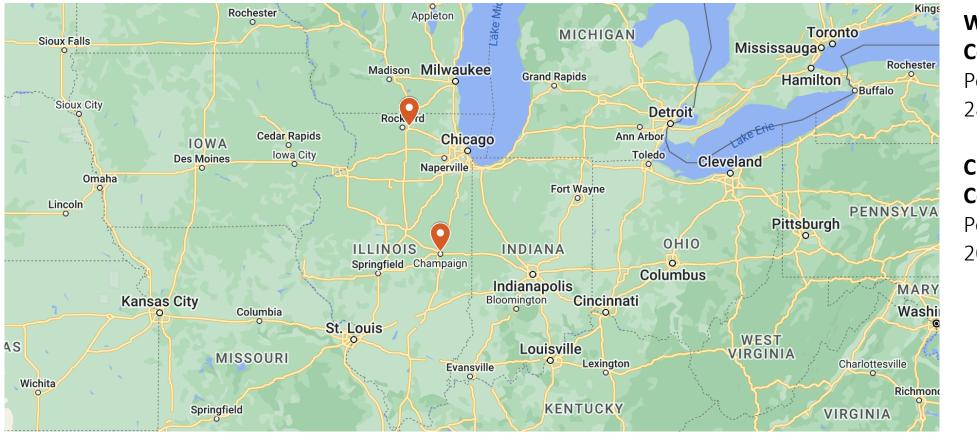
- Check accuracy and relevancy of findings with others
- Link findings to CCBHC certification criteria: staffing, language and culture, services, locations, service hours, and evidence-based practices
- Identify recommendations based on the findings
- Prioritize action steps to address needs and reduce barriers
- Communicate results with leaders, staff, and community partners
- Routinely revisit results to inform CCBHC decisions

Case Example: Community Needs Assessments



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CCBHC Service Areas



Winnebago County Population: 283,119

Champaign County Population: 205,943

Rosecrance CCBHCs Overview

- Description of Rosecrance
- Population of focus for CCBHCs
- Summary of CCBHC goals
- CCBHC data infrastructure

 Cross-departmental steering committee
 myAvatar by Netsmart

Rosecrance Needs Assessment Process

- Identified teams within the steering committee. All teams participated in the needs assessment.
- Reviewed epidemiological data for the service area, organizational policies, procedures, and reports
- Analyzed penetration rates for key services
- Interviewed community organizations to gather input about community needs (e.g., law enforcement, FQHC, NAMI, mental health board, regional health council, United Way)
- Interviewed Rosecrance program leaders and staff to identify internal barriers, needs, and opportunities
- Convened focus group with clients

What Findings Emerged from the Assessment?

- Community-level needs
- Program- and organizational-level barriers and opportunities
- State- and community-level considerations

How Have Findings Informed Your CCBHC?

- Purchase of on-demand interpreter services
- Development of outcome measures in EHR
- Agency-level discussions about integrated care
- Identification of new partnerships (e.g., FQHC)
- Implementation of new services and supports to meet required services

What Lessons Would You Like To Share with Other CCBHCs?

- Don't take the input personally
- Prioritize findings and action items based on short-term, mid-term, and long-term changes
- Utilize a team-based approach to complete the assessment and implement changes
- Some findings will require a lot of time and effort to address

Breakouts: Sharing With Your Peers



In each room, have each participant share:

- Who you are: name, organization, role in CCBHC implementation
- Share the (1) data sources and (2) quantitative and qualitative methods you are using to inform your community needs assessment. Discuss how you plan to use the community needs assessment to inform your CCBHC.

Be prepared to share some themes from your group!

Closing: Sharing and Preparing



- Volunteers: What did you hear from others in terms of questions and ideas?
- Question Log: Take 2–3 minutes to put any questions you have about the learning series curriculum in the chat
- Next Session: February 21, 2022, 3–4:30pm EST
- Topic: Building Infrastructure and Practices for NOMs Data Collection, Analysis, and Reporting
 - Prep work: Draft a workflow for NOMs data collection (i.e., <u>who</u> will collected NOMs data; <u>how</u> will data be collected; <u>when</u> will it be collected)

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Resources: Needs Assessment

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Resources

- <u>Behavioral Risk Factor Surveillance System</u> (BRFSS): Through the Center for Disease control and Prevention (CDC), BRFSS is the nation's premier system of health-related telephone surveys that collect state data about U.S. residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services. Established in 1984 with 15 states, BRFSS now collects data in all 50 states as well as the District of Columbia and three U.S. territories.
- <u>Prevalence and Trends Data</u> (explore by location, explore by topic)
- <u>Web Enabled Analysis Too</u>l (WEAT): WEAT permits users to create custom crosstabulation tables for health indicators within selected states.
- <u>National Survey of Children's Health</u> (HRSA) and <u>interactive data search</u> by the Data Resource Center for Child & Adolescent Health

Resources

- <u>Chronic Disease Indicators, by location</u>:
 - Alcohol use among youth
 - Alcohol use before pregnancy
 - Binge drinking prevalence among youth
 - Binge drinking prevalence among adults > = 18 years
 - Binge drinking prevalence among women aged 18-44 years
 - Binge drinking frequency among adults aged >= 18 years who binge drink
 - Binge drinking intensity among adults aged >= 18 years who binge drink
 - Heavy drinking among adults > = 18 years

Resources

Nutrition, Physical Activity, and Obesity, by location:

- Adults who have obesity
- Adults who have overweight classification
- Adolescents who have obesity
- Adolescents who have overweight classification
- WIC 2-4 years old who have obesity
- WIC 2-4 years old who have an overweight classification
- WIC 3-23 months who have a high weight for length



Oral Health, by location:

- Adults aged 18+ who have visited a dentist or dental clinic in the past year
- Adults aged 65+ who have lost all of their natural teeth due to tooth decay or gum disease
- Adults aged 65+ who have lost six or more teeth due to tooth decay or gum disease

State Level Resources: KFF

- Demographics and the Economy Indicators
- **Disparities Indicators**
- Health Costs and Budgets Indicators
- <u>Health Status</u>

- Diabetes
- Health Coverage and Uninsured
- Life Expectancy
- Medicaid and CHIP
- Medicaid Behavioral Health Services
- Medicare

- Mental Health and Substance Use
- Obesity
- Opioid Epidemic
- Oral health
- Physical Activity
- \circ $\,$ Providers and Service Use
- Self Reported Health Status
- \circ Smoking

County Level Resources

Find County level health information based at <u>County Health Rankings</u>. This link will rank (overall) county health status and includes specific information on length of life, quality of life, health behaviors, clinical care, social and economic factors, and physical environment.

CCBHC Needs Assessments

- Hiawatha Valley Mental Health Center CCBHC Needs Assessment
- <u>Michigan CCBHC Handbook</u>
- Oregon CCBHC Provider Needs Assessment Template
- <u>State of Oklahoma CCBHC Needs Assessment</u>

Collaboration with Other Grantees

- Peer cohort calls as a regular standing space for engaging with others going through the same things as you:
 - CCBHC-E executives meet the last Friday of each month from 12-1 p.m. ET. <u>Register here</u>.
 - CCBHC-E program directors meet the first Wednesday of each month from 12-1 p.m. ET. <u>Register</u> <u>here</u>.
 - CCBHC-E evaluators or CQI leads meet the first Tuesday of each month from 3:30-4:30 p.m. ET. <u>Register here</u>.
 - CCBHC-E medical directors meet the first Monday of each month from 12-1:00 p.m. ET. <u>Register</u> <u>here</u>.
- Additional Support: We welcome you all to join our virtual community where you can communicate with your peers, post questions, comments and share resources amongst the cohort! <u>JOIN HERE!</u>

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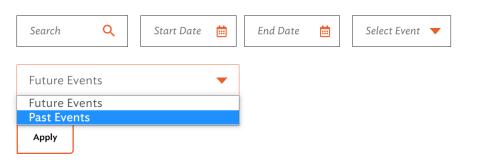
Collaboration with Other Grantees



Thank you for attending today's event.

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Calendar of Events



Your feedback is important to us!

Please complete the brief event survey that will open in a new browser window at the end of this meeting. Your input helps us improve our support offerings and meet our SAMHSA data metrics.

