

council for Mental Wellbeing

Investing in Staff Development to Promote CCBHC Success

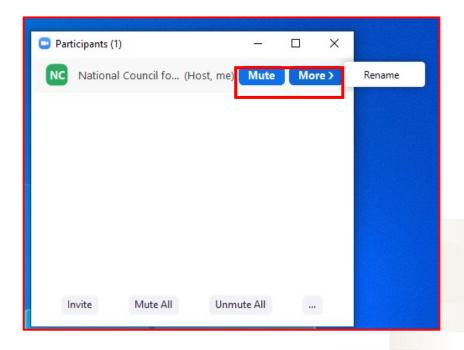
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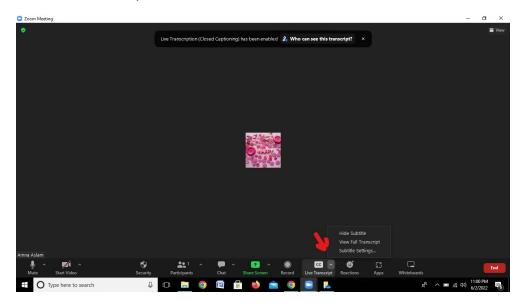
Logistics

- Please rename yourself so your name includes your organization.
 - For example:
 - Amber Williams, 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.



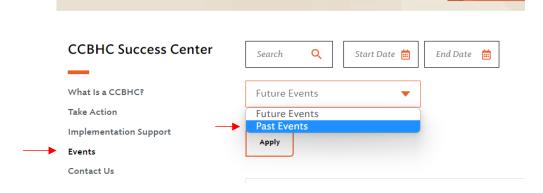
How to Enable Closed Captions (Live Transcript)

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</u> <u>Success Center</u> website under "Events" > "Past Events" within 2 business days.

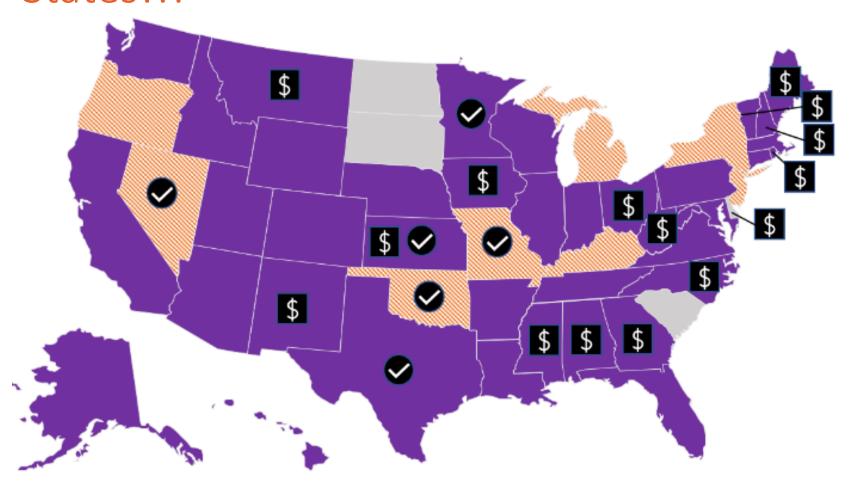


Learning Objectives

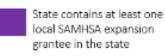


- Describe the national model for Certified Community Behavioral Health Clinic (CCBHC) including the types of mental health and substance use services.
- Discuss the role of staff development in meeting CCBHC requirements involving staffing, accessibility and scope of services, care coordination, and organization authority.
- Strategizing on how to use competency mgmt. and training to invest in your staff.

More than 540 CCBHCs Across the United States!!!









CMS-approved payment method for CCBHCs via a SPA or 1115 waiver separate from Demonstration



Chosen to receive one-year planning grant needed to join Medicaid Demonstration staring in March 2023

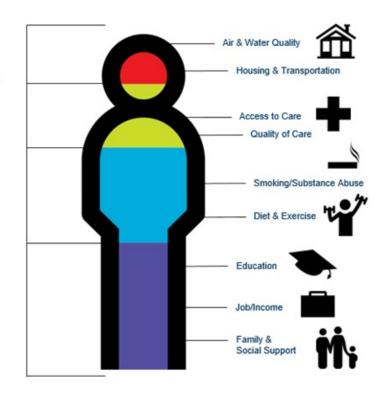
Why CCBHC?

10% Physical Environment

20% Clinical Care

30% Health Behavior

40% Social Economic



- As many as 40 percent of all patients seen in primary care settings have a mental illness.
- 68 percent of adults with mental disorders have comorbid chronic health disorders
- 80 percent of patients with behavioral health concerns present in ED or primary care clinics.

The Greenlining Institute



What is a CCBHC?

CCBHC is an integrated community behavioral health model of care that aims to improve service quality and accessibility. CCBHCs do the following:

Provide integrated,
evidence-based,
trauma-informed,
recovery-oriented and
person-and-familycentered care

Offer the full array of CCBHC-required mental health, substance use disorder (SUD) and primary care screening services

Have established
collaborative
relationships with other
providers and health care
systems to ensure
coordination of care

Person-centered and Family-centered Care:

A Cornerstone of the CCBHC Model



- All CCBHC services, including those supplied by its DCOs, are provided in a manner reflecting person and family-centered, recovery-oriented care, being respectful of the individual consumer's needs, preferences, and values, and ensuring both consumer involvement and selfdirection of services received.
- Services for children and youth are family-centered, youthguided, and developmentally appropriate.

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Populations Served by CCBHC

CCBHCs are available to any individual in need of care, including (but not limited to):

- people with serious mental illness
- serious emotional disturbance
- long-term chronic addiction
- mild or moderate mental illness and substance use disorders and complex health profiles.

CCBHCs will provide care regardless of ability to pay, caring for those who are underserved, have low incomes, are insured, uninsured, or on Medicaid, and those who are active-duty military or veterans.

CCBHC Criteria

- □ Staffing
- ☐ Access & Availability of Services
- ☐ Care Coordination
- ☐ Scope of Services
- ☐ Reporting
- Organizational Authority





Staffing

- The staff (both clinical and non-clinical) is appropriate for the population receiving services, as determined by the community needs assessment (CHA), in terms of size and composition and providing the types of services the CCBHC is required to and proposes to offer.
- CCBHC staff must include a medically trained behavioral health care provider who can prescribe and manage medications, including buprenorphine and other FDA approved medications used to treat opioid, alcohol, and tobacco use disorders.
- The CCBHC has a training plan for all CCBHC employed and contract staff who have direct contact with people receiving services or their families AND the CCBHC regularly assesses the skills and competence of each individual furnishing services.

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Access & Availability of Services

- Services are provided during times that facilitate accessibility and meet the needs of the population, including some evening and weekend hours.
- Services are provided in locations that ensure accessibility and meet the needs of the population to be served (ex: in the community or in home)
- Transportation or transportation vouchers are provided, as needed, for people receiving services.
- The CCBHC uses telehealth/telemedicine, video conferencing, remote patient monitoring, asynchronous interventions, and other technologies, to the extent possible,
- Outreach, engagement, and retention activities are conducted to support inclusion and access for underserved individuals and populations.
- Timely access to services for routine and emergent/urgent needs for both new and current clients.
- Crisis management services are available 24 hours per day/7 days per week.
- No refusal of services due to inability to pay or place of residence.





Care Coordination

Partnerships or agreements required with:

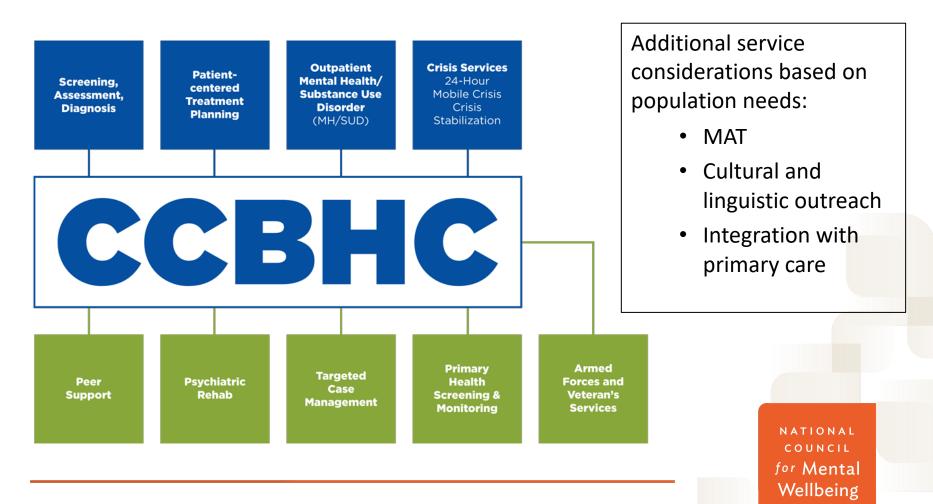
- FQHCs/rural health clinics
- Inpatient psychiatry and withdrawal management
- Post-withdrawal management step-down services
- Residential programs
- Other social services providers, including: schools, child welfare agencies, juvenile and criminal justice agencies and facilities, Indian Health Service youth regional treatment centers, child placing agencies for therapeutic foster care service
- Department of Veterans Affairs facilities
- Inpatient acute care hospitals and hospital outpatient clinics

Considerations

- Leverage technology to ensure quality data
- ☐ Coordinate care across the spectrum of health services, including physical and behavioral health and other social services
- Establish or maintain electronic health records (EHR)
- Health IT systems are being used to conduct population health management, quality improvement, reducing disparities, and for research and outreach



CCBHC Scope of Services



CCBHC Reporting Requirements

SAMHSA CCBHC Grants

- National Outcome Measures (NOMs)
- Health information, such as vitals an
- Infrastructure Development,
 Prevention and Mental Health
 Promotion (IPP)
- Annual/Programmatic Report
- Disparities Impact Statement
- Quality measures

State Certified CCBHCs (demo)

- Quality measures
- State specific reporting requirements

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Organizational Authority and Governance

The Board must have meaningful participation by adult consumers with mental illness, adults recovering from substance use disorders, and family members of CCBHC consumers through the options listed below:

- 51 percent of the board are families, consumers or people with lived experience of mental health and/or substance use disorders
- Establish an Advisory Work Group comprising of individuals with mental and substance use disorders, and family members, to provide input and guidance to the CCBHC on implementation, services, and policies.

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Early Outcomes of the CCBHC Model

CCBHCs are:

- Hiring dedicated population health analysts, clinicians, other staff.
- Using data analysis to understand utilization and risk among client population.
- Developing **care pathways** to ensure comprehensive, assertive service delivery to high-risk populations.
- Strengthening integration with primary care to help clients manage chronic physical health conditions that are cost drivers.
- Partnering with hospitals to **streamline care transitions** and prevent readmission.
- Assessing for non-health needs that are determinants of health (e.g. housing, food, etc.).



Addressing Health Disparities

100% of CCBHCs said their CCBHC status has helped them serve people of color, improve access to care, and reduce health disparities in their communities.

- 75% increased screening for unmet social needs (e.g., housing, income, insurance status, transportation)
- 67% developed organizational policies and protocols to improve diversity, equity, and inclusion
- 60% hired staff who are demographically similar to the populations their clinics serve
- 53% initiated or expanded translation services



Staff Development and Training &

Investment in Your Staff

Training Challenges and Expectations

- Remains a top issue for leadership and clinical management to consider
- Implementing new service types requires educating on those services and needs of patients receiving services
- Bringing on new staff means assessing knowledge and addressing knowledge gaps
- Transitioning current staff work effort and content knowledge
- Reconciling live trainings with online trainings and tracking for reporting purposes





CCBHC Staffing Needs



Regulatory Requirements

Operates within the bounds of existing state licensure and certification regulations.



Staff Training

Trained in person-centered, family-centered, trauma-informed, culturally & linguistically-competent, and recovery-oriented care.



Diversity Requirements

Cultural competency training must address the diversity within each CCBHC's service area.



Military Requirements

Training must include information related to military culture.



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Training Goals

Training that Prioritizes Quality of Care

- Emphasizes whole person care
- Increased focus on evidence-based practices
- Places high value on patient outcomes as a metric of success







Culture of Learning



Two Types of Learning Culture

- Neglected
 - High turnover
 - Difficulty with recruitment
 - Lack competitive advantage

- Transformative
 - Employment engagement
 - A 'growth mindset'
 - Enhanced creativity and innovation
 - Employee motivation
 - Leadership development
 - Technical skills



Fostering Competence & Confidence in Onboarding

Assess Readiness to Practice

Provide Personalized Education/Coaching

Use Data to Support Job
Readiness





Tailor education to the individual's knowledge gaps to improve the quality of onboarding while you reduce onboarding time.





What Happens After Onboarding?

1 to 1.5 years

is the estimated amount of time that the concept of "onboarding" continues for a new employee.

Macon. 2017



Evaluate Ongoing Competency

Evaluate ongoing competency to increase safety and improve care for the people you serve.

What should you do to ensure that new and current employees are successful and feel supported?



Develop High-Potentials

Those employees who are consistently exemplary in one or more areas (e.g., job-related KSACs, critical success factors, leadership qualities, etc.)



Identifying and Further Growing High Potentials



Develop High-Potentials

Those employees who those who are consistently exemplary in one or more areas (e.g., job-related KSACs, critical success factors, leadership qualities, etc.)

The top 5 percent

of employees often account for 25 percent of an organization's overall output.

Aguinis & O'Boyle Jr., 2014; Chamorro-Premuzic, Adler, & Kaiser, 2017

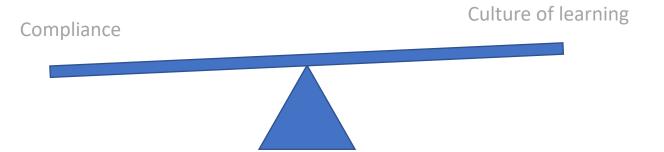
- High-potentials will appear at every level in your organization.
- Continue to emphasize their strengths and further develop their competencies.
- Caution! Avoid falling into the trap of prematurely promoting a highperforming individual contributor into a leadership position.





What to Prioritize in Training

Treat your workforce like an investment





Beyond Compliance

Compliance

Culture of Learning

Focuses on completing a certain number or checklist of courses within the year

Creates an opportunity for mastering the basics while also exploring topics of interest to each staff member

May include redundant courses from previous years rather than new topic areas

Encourages an exploration of topics that are most timely or relevant for current presenting issues

Primarily focused on course-style learning

Expands opportunities for learning to mentorship, coaching, shadowing, and other in vivo experiences



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RELIAS

Training Success



Principles of Change



Create an environment in which staff can be empowered to flourish in their work and lead their own development and change



Note: No one will self advocate in an environment that doesn't support or allow for self advocacy



Staff Development Initiatives

Discovery of staff interests is part of the fabric of doing business. You have to know your staff, their strengths, their interests and what energizes them.

- Designate the supervisor, HR, or unique staff roll to assure meaningful relationship with each staff for purpose of knowing their strengths and goals. (Note: sometimes supervisors are not the right people for this job)
- Assure individual development plans are formally part of the appraisal system or related other system.



5 Habits of Responsive Organizations

- Establish & Communicate Goals
- Experiment with Change
- Free the Information
- Shared Goals & Decision Making
- Measure & Publish Results





Actions to Take for Success

- Know your baseline
- Identify indicators of success
- Measure success
- Bring everyone in
- Establish leadership commitment



Questions?





Contact Relias

Questions:

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https://www.relias.com/resource/diversity-equity-inclusion-efforts-for-healthcare





CCBHC Success Center Support

CCBHC Success Center

CCBHC Success Center

What is a CCBHC?

Implementation Support

Events Contact Us Welcome to the National Council for Mental Wellbeing's Certified Community Behavioral Health Clinic (CCBHC) Success Center, a hub for data, implementation support and advocacy to support the Certified Community Behavioral Health Clinic initiative.

SAMHSA Certified Community Behavioral Health Clinic Grants Opportunities

The Substance Abuse and Mental Health Services Administration (SAMHSA) announced it is now accepting applications for two FY 2022 CCBHC grant programs. <u>Certified Community Behavioral Health Clinic – Planning, Development and Implementation Grants (CCBHC-PDI) are available to clinics that are new to the CCBHC model and <u>Certified Community Behavioral Health Clinic – Improvement and Advancement Grants (CCBHC-IA) are available to CCBHC-BHC sthat have been certified by their states or received previous CCBHC-Expansion grants. The grants are available to treatment providers in every state.

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Expansion grant recipients that received funding in FY 2021 under SM-21-013 are not eligible to apply for under this Notice of Funding Opportunity.

Questions? Contact us at:

CCBHC@TheNationalCouncil.org

Visit our Success Center website at:

https://www.thenationalcouncil.org/program/ccbhc-success-center/

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