for Mental
Wellbeing

HEALTHY MINDS
STRONG COMMUNITIES

Integrated Care Services: Data & Metrics

May 28, 2025





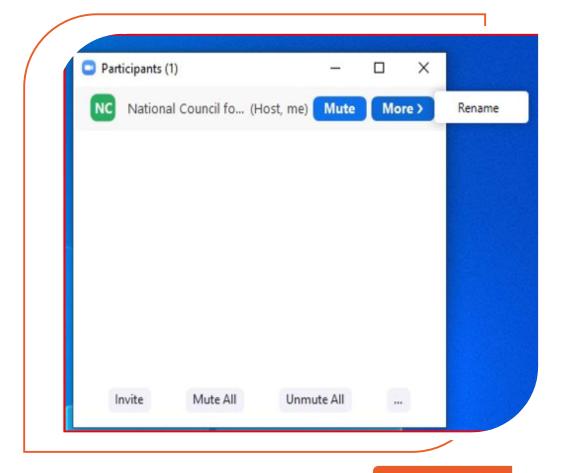
Acknowledgements and Disclaimer

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Logistics

- Please rename yourself so your name includes your organization
 - For example:
 - Roara Michael, 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 Danielle Foster, National Council

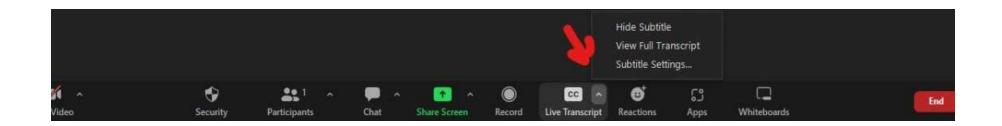






How to Enable Closed Captions (Live Transcript)

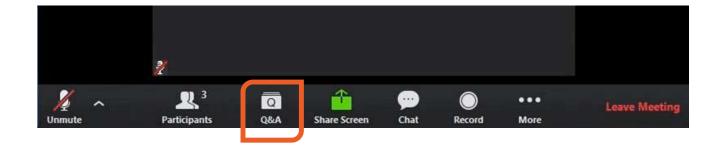
Next to "Live Transcript," click the arrow button for options on closed captioning and live transcript.







How to Use the Q&A Feature





NTTAC Learning & Action Series Team



Renee Boak, MPH
Consultant



Clement Nsiah, PhD, MS
Project Director



Roara Michael
Project Manager



Danielle Foster, LMSWProject Coordinator



Session Presenters



Katie Lipp, LICSW, PMP
Principal, Bowling Business
Strategies



Lauren Moyer, LSCSW, LCSW
Executive VP of Clinical Innovation,
Compass Health Network





Learning Objectives



Participants will learn:

- Methods for collecting and analyzing screening and monitoring data
- 2. Using data to inform care and improve outcomes
- 3. Identifying areas for improvement and upskilling
- 4. Implementing and evaluating improvement initiatives
- 5. Overcoming common challenges and barriers







- Does your organization have dedicated staff to support compliance and quality improvement activities?
 - Yes
 - o No
- Does your agency have dedicated staff to generate and analyze reports?
 - Yes, we have staff who can pull reports and analyze data
 - Yes, we have staff who can pull reports from the EHR but do not analyze data
 - No, we do not have dedicated staff to pull reports or analyze data
- Does your agency provide training on how to understand and utilize data?
 - Yes
 - o No



Slide 9

Renee- any ideas for some polls to drive early engagement?

katie@bowlingbiz.com, 2025-04-21T13:18:28.117

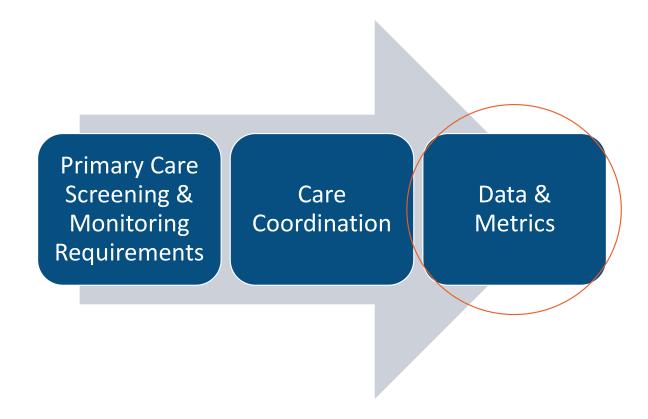
DF0 0 [@Renee Boak] Danielle Foster, 2025-04-29T16:56:17.764

RB0 1 [@Danielle Foster] [@Roara Michael] - I added a few poll questions for this session. Thanks!

Renee Boak, 2025-04-30T17:44:39.856



Series Overview





Requirements Review

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Primary Care Screening



Universal Screening

- Pregnancy status
- Relevant medical history and major health conditions that impact current psychological status
- Substance use
- Medication list
- Assessment of need for physical exam or further evaluation

Conditional Screening

- Screening for people at risk for common physical health conditions experienced by CCBHC population
 - across the lifespan
 - as determined by Medical Director
 - includes collection of biologic samples.



Monitoring includes:

Ensuring access to primary care

Ensuring ongoing periodic labs and physical measurement of health status indicators and changes in status of chronic conditions

Coordination with primary care and specialty including appointment tracking

Promoting a healthy behavior lifestyle

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Slide 13

ZR0

This should be 4g3
Zahn, Rachel (SAMHSA/CMHS), 2025-05-06T17:48:19.929

- CCBHC develops, implements, and maintains an effective CQI plan for all services provided.
- CCBHC establishes a critical review process to review CQI outcomes and implement changes to staffing, services, and availability with involvement of Medical Director.
- CQI plan focuses on indicators related to improved behavioral and physical health outcomes and takes actions to improve patterns of care delivery and demonstrate improvement in performance.

Data Collection Methods

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Potential Data Sources



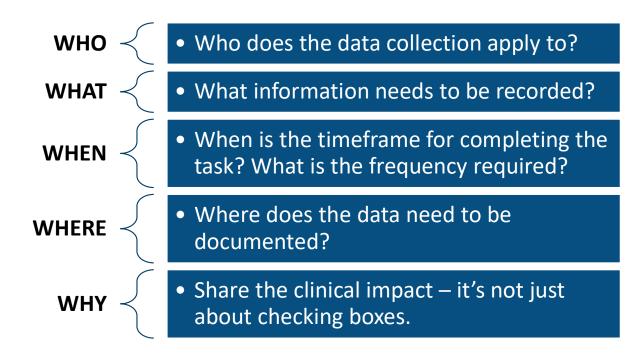
What other data sources does your organization draw from?

Please enter in the chat.

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Provide Clear Instructions on Data Collection







Staffing Needs

Functions

- Administering screenings
- Administering assessments
- Communication with external partners
- Scanning data into EHR
- Entering data into EHR

Are staff working at the top of their skill sets?

Considerations

- What skills does this require?
- Can these skills be developed through training?
- Are specific credentials needed?
- Should staff be cross-trained or should this be a designated role?







Strengthening Data Collection

- Review the workflow associated with how individuals are screened.
- Reinforce why data is being collected.
- Ensure there are multiple opportunities for screening to get completed.
- Get input on your process from individuals served.
- Get staff input.
- Talk to community-based partners with relevant experience.
- Create scripts/messaging with staff.



ZR0 If possible, maybe add something about making sure all staff are on the same page and understand why they are collecting data.

Zahn, Rachel (SAMHSA/CMHS), 2025-05-06T17:55:07.349

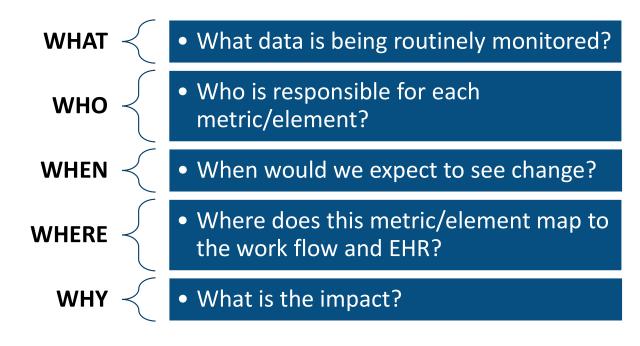
Data Management

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Provide Clear Instructions on Data Management



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Staffing Needs

Functions

- Data capture
- Data quality
- Data analysis
- Data visualization
- Data communication

Do we have the staff to support system transformation?

Considerations

- What skills does this require?
- Can these skills be developed through training?
- Are specific credentials needed?
- Should staff be cross-trained or should this be a designated role?



What is the background of the staff responsible for your data management?

Enter in the chat.

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Slide 24

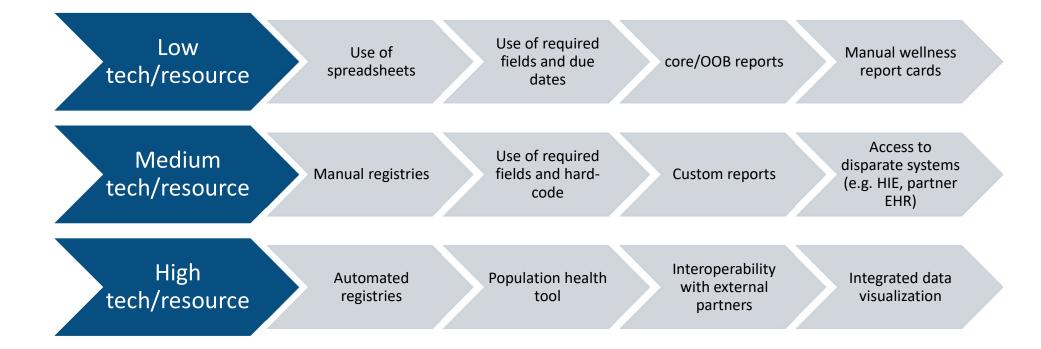
Create poll ka0

katie@bowlingbiz.com, 2025-04-18T18:55:05.457

[@Danielle Foster] just confirming we have this in zoom before I delete the comment Roara Michael, 2025-04-30T16:09:39.562 RM0 0



Data Management Strategies







Missouri Example

- Building data management into PPS for Statewide data needs
 - CLIVE Solutions
 - Data Advisory Board
 - HCH
 - Hospital and Jail Cost savings
 - Value Based Incentives



ka0

Flag for Lauren katie@bowlingbiz.com, 2025-04-18T18:39:17.292

CQI

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CQI Process

What are we trying to accomplish?



How will we know that a change has resulted in improvement?



How and when do we revisit our strategy to drive improvement?



Outcomes vs. Outputs

Outputs: the immediate results of an activity or project.

Outcomes: the changes or benefits that occur as a result of the outputs.

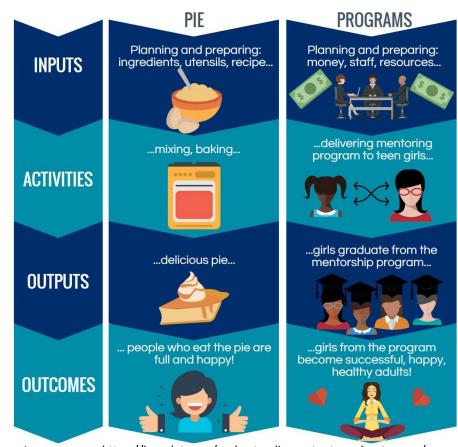
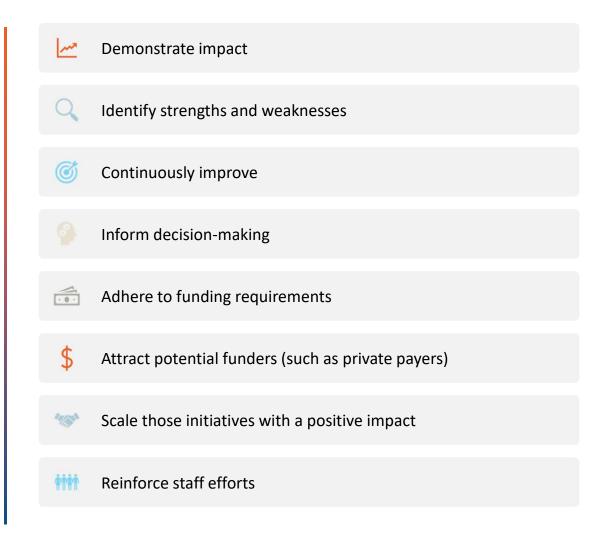


Image source: https://harcdata.org/understanding-outputs-and-outcomes/

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Importance of Measuring Outcomes





Using Data to Support VBP/QBP Propositions

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- Quality Based Payments (QBPs) are optional under PPS-1 and PPS-3 but required under PPS-2 and PPS-4.
- Value Based Payments (VBPs) are arrangements made with individual payers.
- Both involve incentive payments for meeting or exceeding specific quality benchmarks.

SAMPLE PROPOSITION

Your community has historically struggled with ED boarding. Since becoming a CCBHC, your organization has implemented Open Access, shrinking Time to Initial Evaluation from an average of 60 days to an average of 4. In reviewing your payer mix, you see that a sizeable percentage of individuals served have X private payer. You approach this payer with your data and request a VBP to incentivize continued quality.

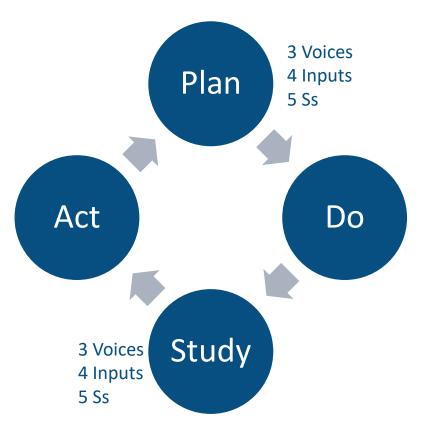


3-4-5 Framework





3-4-5 in Context of PDSA



Plan: Identify the problem or opportunity being sure to incorporate voices of staff, individuals served, and the data itself. Identify additional data and begin to formulate stories (theories) for what is happening. Draw on your previous successes to generate solutions.

Do: Select and implement a change effort and collect data to monitor the impact of the change.

Study: Surveil and analyze the data to determine if the desired outcomes were achieved and identify any lessons learned.

Act: Decide whether to adopt the change, try an alternative solution, or run through the cycle again with adjustments.



D(0

Can we spell out steps here?
De Voursney, David (SAMHSA/CMHS, 2025-05-16T20:29:26.996



Rapid Cycle PDSA Example

Objective: Increase the rate of blood pressure screening

Round 1: Using feedback from staff and individual served, plan to train all CMs and Therapists to take blood pressure

Plan

Round 2: Develop detailed protocol for results outside of normal limits including paging system and f/u with primary care

Round 1: Staff are comfortable with training and task but need access to medical staff if result is outside normal limits

Study

Round 2: Repeat readings completed by medical staff vary considerably from initial result

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Lessons From a Leader

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Lessons From a Leader

- 1. What tools do you use to support primary care screening and monitoring? How did you decide on this process/method/tool?
- 2. What changes have you made to your pathways since implementing screening and monitoring? What data informed the need for these changes?

Questions?



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