

FY  
18/19

# Substance Abuse and Mental Health Quality Management Plan

Big Bend Community Based Care, Inc.

The purpose of Big Bend Community Based Care Substance Abuse and Mental Health Quality Management system is to ensure excellent behavioral health care outcomes for children, adolescents, adults and elders served in our communities. One of the commitments we make toward fulfilling this purpose is to employ an analytic and systemic approach to planning and performance management.



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FY 18/19

Substance Abuse and Mental Health  
Quality Management Plan

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<b>1. AGENCY OVERVIEW .....</b>	<b>4</b>
A. Mission .....	4
B. Network Management Agency .....	4
C. Role as a Network Manager .....	5
D. Purpose, Philosophy and Scope of Quality Management .....	5
E. Continuous Quality Improvement (CQI) .....	6
F. Quality Management Planning .....	6
<b>3. SAMH QUALITY MANAGEMENT .....</b>	<b>7</b>
A. Quality Management Responsibility .....	7
B. Staff for SAMH QM Activities .....	7
C. Quality Management Functions .....	7
<b>4. FY 18/19 QUALITY ASSURANCE ACTIVITIES.....</b>	<b>8</b>
A. Network Management Agency Level .....	8
1. Internal Quality Assurance .....	8
2. External Quality Assurance .....	8
B. Contractor Level.....	8
1. Subcontractor Review Components.....	9
2. Exit Meetings with Contractors .....	9
3. Monitoring Reports .....	9
4. Performance Improvement Requirement .....	10
5. Critical Life, Health, or Safety Concerns .....	10
6. Stakeholder Input.....	10
7. Complaints and Grievances .....	11
<b>4. DATA AND PERFORMANCE .....</b>	<b>11</b>
<b>5. CONTINUOUS QUALITY IMPROVEMENT .....</b>	<b>12</b>
A. Data Analysis.....	12
B. Corrective Action Plans .....	12
C. Training .....	12
D. Quality Management and Strategic Planning .....	13
<b>6. ACCREDITATION STATUS .....</b>	<b>13</b>

## 1. AGENCY OVERVIEW

### A. MISSION

The mission of Big Bend Community Based Care, Inc. (BBCBC) is to provide the highest quality child welfare, substance abuse and mental health services for children and families through a network of accredited service providers within their own communities.

### B. NETWORK MANAGEMENT AGENCY

BBCBC is an accredited network management organization that was initially formed in 2002 to develop community-based child welfare services and supports for six counties within Florida's Second Judicial Circuit. In 2005, BBCBC assumed responsibility for child welfare services in the six counties within the Fourteenth Judicial Circuit at the request of the Florida Department of Children and Families (DCF). In 2012, BBCBC was awarded the Managing Entity state contract to provide Substance Abuse and Mental Health (SAMH) services for the Northwest Region, which encompasses the 18 counties that make up the First, Second, and Fourteenth Judicial Circuits, as well as Madison and Taylor Counties from the Third Judicial Circuit.

**Figure 1. BBCBC Service Area – Northwest Florida**



As a Network Management Agency, BBCBC's primary role is to establish and maintain an integrated network of providers with the goal of ensuring optimal access to, and the provision of, quality services. The agency's approach is collaborative and inclusive of DCF, subcontracted service agencies, formal and informal providers, key community stakeholders, and the individuals, families and communities served.

Through this collaboration, BBCBC strives to develop and manage a System of Care that demonstrates quality programmatic and financial outcomes through partnerships, transparency, and efficiency. The System of Care is based on a service delivery approach designed to create a broad, integrated process for meeting our service population's needs.

In May 2016, BBCBC was awarded the prestigious *Florida's Governor's Sterling Award*. For 24 years, the *Florida's Governor's Sterling Award* has recognized organizations and businesses in

Florida that have successfully achieved performance excellence within their management and operations systems. BBCBC is a first time recipient and the first combined Community Based Care Child Welfare State Lead Agency and Managing Entity to earn this award.

### C. ROLE AS A NETWORK MANAGER

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As a Network Management Agency, BBCBC'S role within the social services system is distinct from that of a service provider. BBCBC provides system-wide operational leadership and professional development, assures quality, compliance and fiscal accountability, and performs administrative functions that link innumerable services throughout our System of Care. These unique functions require a management approach that is specific to the agency's role and function.

### D. PURPOSE, PHILOSOPHY AND SCOPE OF QUALITY MANAGEMENT

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The purpose of BBCBC's Quality Management (QM) System is to ensure excellent behavioral health care outcomes for the children, adolescents, adults and elders served in our communities. Our success in implementing this program is essential to assuring that substance abuse and mental health practices and services provided in our communities meet high standards for quality and accessibility, demonstrate best practices, utilize evidence-based methods and comply with all federal and state regulatory requirements. The QM System encompasses the full spectrum of behavioral health care services rendered by individual and network providers and address the evaluation of those services to ensure that medically necessary, appropriate care is provided in accordance with contractual and regulatory requirements. Input from clients, providers and community stakeholders are essential to delivering meaningful services.

Implementation of our QM System embraces the following quality improvement principles:

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|--|---|
| <i>The people we serve come first</i>    | Services must be responsive and designed to meet the needs of clients, especially the priority populations. Data related to complaints and grievances, as well as satisfaction survey responses, are essential to quality improvement and in the design and implementation of new services. |
| <i>Data informed practice</i>            | Successful Continuous Quality Improvement (CQI) processes create feedback loops, using data to inform practice and measure results. Tools and methods that turn data into information and foster knowledge and understanding are used to inform quality-care decisions.                     |
| <i>Quality improvement is continuous</i> | A continual process of data-gathering, measuring and analysis is essential to assessing performance, identifying service gaps, determining roots causes, implementing improvement strategies, and testing their outcome.  |

*Quality improvement involves everyone*

Quality improvement is the responsibility of every person within the organization and throughout the service system. Every individual influences outcomes and contributes to building and developing quality.

*Leadership support for and involvement in CQI is essential*

Agency executives and the Board of Directors provide strong leadership, direction, and support for quality improvement activities to affect lasting performance improvement.

## E. CONTINUOUS QUALITY IMPROVEMENT (CQI)

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BBCBC's QM System is designed off of Deming's *Plan-Do-Check-Act* model of CQI.

*Plan* The process of defining and planning a System of Care – its programs, processes, evaluation and remediation – in a manner best suited to meet the needs of the clients to be served. *(Agency Strategic, Operational, Quality Management and Risk Prevention Plans)*

*Do* The process of implementing the planned System of Care throughout the service network. *(The provision of services through subcontracted providers and partners)*

*Check* The process of systematically monitoring services, collecting data, obtaining feedback, analyzing findings and identifying trends, strengths and opportunities for improvement. *(The system-wide review and analysis of service indicators and outcomes)*

*Act* The process of implementing performance improvement activities to overcome barriers to quality services and remedy deficiencies. This also involves follow-up to assess the effectiveness of the performance improvement activities implemented. If found to be ineffective, or if more improvement is needed or desired, the cycle continues to the *Plan* phase again and the process repeats. *(Implementing changes to address deficits)*



## F. QUALITY MANAGEMENT PLANNING

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While BBCBC's quality management philosophy and systemic approach are the same for both its Child Welfare and SAMH components, the QM Plans for each of the programs are published separately. This separation allows for the delineation of activities specific to each program's services, populations and contractual requirements.

This document, the *FY 18/19 Substance Abuse and Mental Health Quality Management Plan* addresses quality assurance, continuous quality improvement and quality control activities specific to substance abuse and mental health services.

### 3. SAMH QUALITY MANAGEMENT

#### A. QUALITY MANAGEMENT RESPONSIBILITY

The responsibility for BBCBC's SAMH-related QM efforts ultimately resides with the SAMH Operations Manager. QM system design, planning and oversight are the responsibility of the Quality Management Director.

#### B. STAFF FOR SAMH QM ACTIVITIES

BBCBC has established a team approach responsible for SAMH program quality assurance, control, reporting and improvement activities. The SAMH Operations Manager supervises the SAMH Quality Assurance Specialist (QAS), Prevention Specialist, SAMH Data Administrator, and Network Coordinators. The SAMH Data Administrator supervises the Managing Entity Data Specialist position. BBCBC's SAMH Contract Manager also plays a key role in QM activities.

#### C. QUALITY MANAGEMENT FUNCTIONS

1. Collecting and monitoring data regarding critical incidents, quality of care concerns, client safety issues, client and provider complaints, service utilization, client outcomes, and system performance measures;
2. Assuring the provision of quality services through ongoing monitoring activities including onsite provider reviews, clinical peer reviews, medical/clinical record audits, credentialing file audits, monitoring data integrity and reporting timeliness, and soliciting input from our stakeholders (surveying for client and provider satisfaction, provider access and availability);
3. Reporting and communicating client outcomes and performance issues and trends to staff, Network contractors, and BBCBC's Executive Staff, Management Team, and Board of Directors, as well as DCF;
4. Improving the provision of services by identifying gaps in services and special service needs, identifying and addressing service provider training needs, and implementing and monitoring Corrective Action Plans (CAP) to ensure subcontractor and provider accountability; and
5. Communicating utilization, performance, and outcome data with our stakeholders.

## 4. FY 18/19 QUALITY ASSURANCE ACTIVITIES

The quality assurance activities included in this plan incorporate input from the agency's Board of Directors, partner agencies, service providers, prevention colleagues, and staff.

### A. NETWORK MANAGEMENT AGENCY LEVEL

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#### 1. INTERNAL QUALITY ASSURANCE

Review of Operating Policies – BBCBC'S (internal and external) operating policies are reviewed and updated on an ongoing basis to assure compliance with changes in federal and state requirements, updates to best practices and in response to identified needs for quality improvement.

#### 2. EXTERNAL QUALITY ASSURANCE

Financial Monitoring and Audits – BBCBC's fiscal/financial processes undergo annual monitoring by an independent, certified public accounting agency. Any findings are addressed by the unit with primary responsibility for the identified activity. CAPs are approved by the appropriate supervisor and leadership. Copies of the monitoring reports and any corrective actions are provided to the Board of Directors and DCF.

Programmatic and Administrative Monitoring – BBCBC's SAMH program is monitored by the DCF's Contract Oversight Unit annually and by other state and federal monitors as scheduled for the fiscal year (i.e., Inspector or Auditor General Reviews, Federal Reviews, etc.)

BBCBC's renewal Council on Accreditation (COA) review process was completed in December of 2017. During the review process the SAMH program was reviewed against the rigorous criteria COA uses. Inclusion in this process provided validation for many of the quality management practices of the SAMH program and offered valuable insight on areas for further development.

### B. CONTRACTOR LEVEL

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BBCBC will exceed its performance measure target for the completion of contractor monitoring in FY 18/19. The review schedule is developed to ensure thorough reviews, timely reporting and efficient follow-up.

The sample size for reviews is approximately 10% of the contractor's service population (minimum of 10 cases), but may be adjusted based upon Annual Risk Assessment results, performance data, and/or other identified concerns. Each sample is randomly selected and stratified by relevant

service categories to assure a diverse mix of records for review. Individual records are randomly selected for review within each stratum (if applicable).

## 1. SUBCONTRACTOR REVIEW COMPONENTS

### a. Administration and Management

Contract monitoring of administrative and management functions are completed by the SAMH Contract Manager and includes on-site visits to assure contractual compliance and reviews of personnel files, policies and procedures, and service validation, as well as on-going desk reviews of required reports, performance, and utilization data.

### b. Programmatic Compliance

Reviews for programmatic components are completed by agency staff who have expertise in the component under review (i.e., TANF reviews are completed by the TANF Specialist by reviewing progress notes and treatment plans to assure that TANF goals are included in the consumer's treatment, etc.). Programs and services must comply with applicable laws, rules, and regulations, and with specific guidance documents incorporated into the Managing Entity contract with DCF as well as with the submitted and approved Program Description.

### c. Quality Reviews of Clinical Services

Quality reviews of client files for case management, residential care, medical services, outpatient services and detox, etc., are completed by a licensed therapist and/or a licensed physician contracted by BBCBC for this purpose. Review tools integrate practice items with nationally recognized standards for quality, such as the Council on Accreditation (COA) and Commission on Accreditation of Rehabilitation Facilities (CARF) Standards with specific contractual and state requirements for those services.

## 2. EXIT MEETINGS WITH CONTRACTORS

Following each review, exit meetings are held with the contract provider staff to provide preliminary findings and gather additional information. Data is then compiled and analyzed to assess compliance with requirements, quality standards, and overall performance.

## 3. MONITORING REPORTS

A final report is completed for each contracted provider monitoring review. The report includes a summary and detailed data for compliance and quality. These reports are reviewed and approved by the SAMH Operations Manager and Contract Manager prior to dissemination. Final monitoring reports are sent to the contractor, DCF Contract Manager and BBCBC's SAMH Operations Manager.

#### 4. PERFORMANCE IMPROVEMENT REQUIREMENT

For contractors with monitoring results below 80% in a particular area, the contractor is instructed to submit a CAP. BBCBC's CAP template is provided to the contractor to ensure that the resulting CAP documents how the contractor will address the identified deficiencies, who is responsible, the time frame for completion, the success indicator, and the methodology for measuring success.

CAPs are reviewed and approved by the BBCBC Monitoring Team that participated in the review. Unless there is imminent danger to a client, follow-up will be conducted at periodic intervals until there is sufficient evidence the CAP can be closed.

#### 5. CRITICAL LIFE, HEALTH, OR SAFETY CONCERNS

For any critical life, health, or safety concerns identified during the course of a quality/contract monitoring review, the QAS is responsible for:

- a. Addressing any safety concerns with the provider immediately upon discovery;
- b. Informing the SAMH Operations Manager and Quality Management Director;
- c. Documenting the safety concern and follow-up actions as a formal Request for Action (RFA);
- d. Assuring appropriate action and follow-up within 30 days are initiated to assure safety;
- e. Confirming that documentation of the identified safety concern, RFA, follow-up actions and the resolution of the concern are documented in the consumer's record/file; and
- f. Maintaining a copy of the RFA, documentation of completed follow-up actions and the resolution of the concern with the original review documentation.

#### 6. STAKEHOLDER INPUT

Several strategies will be used to gather input from stakeholders, including:

- a. Consumer Satisfaction Surveys – BBCBC collects Consumer Satisfaction Surveys throughout the fiscal year and provides the survey results to both DCF and Network contractors/providers;
- b. Needs Assessment – BBCBC conducts a formal Needs Assessment to identify any unmet consumer needs in the service area every three years or when a new service is proposed. This assessment may include town hall meetings across the region to ensure that all interested parties have an opportunity to share concerns and needs; and
- c. Solicitation of input from community members and organizations, the court system representatives, and DCF partners.

Additionally, Stakeholder input will continue to be gathered on an ongoing basis via management and programmatic meetings, Community Alliance and Partnership meetings, during and as a result of community activities and collaboration with the Court system, DCF staff and leadership, community members, and other provider and service organizations.

New initiatives, services and activities are developed in cooperation with these stakeholders to address concerns, and update services and practice within the BBCBC System of Care. Specific initiatives are assigned to the COO, SAMH Operations Manager, and/or staff for implementation and follow-up.

BBCBC's Board of Directors, Executive Leadership and Management Team are responsible for reviewing and incorporating stakeholder input in the development of short and long-term planning, policy, training, service development and contracting.

## 7. COMPLAINTS AND GRIEVANCES

All service-related complaints or grievances, whether submitted directly from the complainant or through the DCF Tracker System, are addressed by the SAMH Network Coordinators in accordance with BBCBC Operating Procedure (OP) 1500-1502 – Client Grievances and Complaints. Formal complaints addressed through the DCF Tracker System are tracked for satisfactory completion and necessary follow-up actions.

Quality assurance reviews requested due to a case or staff specific complaint will be completed in accordance with BBCBC OP 800-811 – Special Quality Assurance Reviews. Special Quality Assurance Reviews will be conducted for all formal grievances according to this policy.

## 4. DATA AND PERFORMANCE

BBCBC collaborates with DCF Headquarters and Region staff, the Florida Association of Managing Entities (FAME), Five Points Technology Group, and contracted providers to collect, analyze and disseminate performance data on an on-going basis.

Providers' client-level data is submitted to the BBCBC Behavix data system for reporting to the State's Substance Abuse and Mental Health Information System (SAMHIS) data system. Five Points Technology Group is responsible for supporting the Behavix platform and ensuring the application is defect free. In addition, Five Points provides technical support and producing canned data reports for service/event utilization, client outcomes and performance/contract measures to BBCBC. These data and reports are reviewed and used to identify areas in need of improvement to be addressed via CQI activities. Also BBCBC data staff produce ad-hoc data reports using Microsoft Structured Query Language (SQL). A nightly refresh of Behavix data is transferred to a BBCBC internal server to allow timely data reporting.

A BBCBC objective of fiscal year 18-19 is to update our internal data system to comply with the Department data transition. The Department data system is transitioning from SAMHIS to the Financial and Services Accountability Management System (FASAMS). The 2015 Florida Legislature, through Specific Appropriation 302A, requires the Department of Children and Families to develop and implement a uniform information management and fiscal accounting system for providers of community substance abuse and mental health services. In response to this legislation, the SAMH Program Office, in collaboration with the department's Office of Information Technology, created the FASAMS project. It also established an Information Management Project Team to participate in the development of FASAMS business requirements. BBCBC is working in conjunction with the ME IT workgroup to participate in system validation testing and business rule development. The scale of the proposed changes will require service providers to overhaul their state reporting capacity. BBCBC is working to ensure our system direct data entry capability is maintained to support smaller providers.

SQL server continues to be the primary platform to produce ad-hoc client specific and aggregate data reports to internal and external customers. BBCBC has expanded our use of Microsoft SharePoint platform. SharePoint has active directory user authentication for staff access to internal documents and public facing capacity to promote agency announcements.

## 5. CONTINUOUS QUALITY IMPROVEMENT

BBCBC's CQI activities for FY 18/19 includes:

### A. DATA ANALYSIS

Aggregated data reports for indicators such as service/event utilization, client outcomes and performance/contract measures, reviewed monthly or quarterly as appropriate to the data indicator. Areas in need of improvement will be addressed through corrective actions at the Network or provider level, as appropriate.

BBCBC remains committed to the use of data analytics to improve performance. Based on feedback from our partners, the SAMH program refocused efforts to ensure quality in periodic data reporting to our partners. This includes an updated quality review process prior to submission of data to check for errors and ensure timeliness of reporting.

### B. CORRECTIVE ACTION PLANS

BBCBC tracks agency-level CAP items. CAPs required of contractors as a result of BBCBC monitoring are reviewed for completion and effectiveness during subsequent follow-up review(s).

### C. TRAINING

All providers are required by contract to complete HIPAA and Security Awareness Training and compliance with this requirement is verified during Administrative Monitoring.

BBCBC consistently shares information with providers regarding appropriate trainings in which they may choose to participate. These opportunities are shared electronically and/or are posted on the BBCBC website. Additionally, BBCBC ensures that PATH, TANF and ALF training/technical assistance is provided annually throughout the Region. As specific training needs are identified, BBCBC will work in collaboration with DCF to address the need.

#### D. QUALITY MANAGEMENT AND STRATEGIC PLANNING

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Whether long- or short-term, the strategic planning process at BBCBC includes a situational analysis that includes both a needs assessment and ongoing quality assurance and improvement data. The needs assessment for short-term plans may be abbreviated or more informal than that used for the long-term plan. However, a focus on demographic information, changes in the service population, trends in program performance, survey data and analysis of strengths and weaknesses in relation to these variables are the basis for the assessment. Quality assurance mechanisms for initiatives developed as part of the agency strategic plan are integrated into the planning process to assure that quality performance can be assessed.

## 6. ACCREDITATION STATUS

BBCBC was originally accredited as a Network Management Agency by COA in 2009. The agency was re-accredited in December 2017.