AHCCCS Targeted Investments Program

Justice Quality Improvement Collaborative

Matthew Martin, PhD

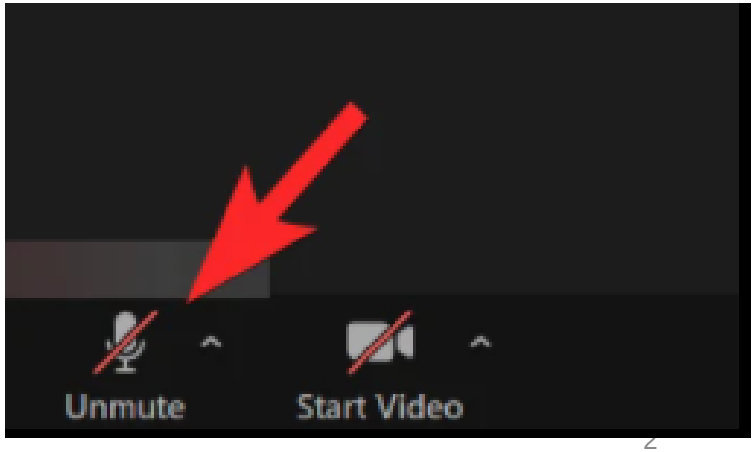
TIP Justice Year 6: Session #3
September 20, 2022

General Housekeeping

- **Zoom Meeting Format** vs. Zoom Webinar Format
  - More interactive
  - All participants can mute/unmute their own audio

- Please **mute** yourself when not presenting or speaking

- This meeting is **recorded**



Agenda

TIME	TOPIC	PRESENTER
11:30 AM – 11:35 AM	Introduction & Agenda Review	Kailey Love
11:35 AM – 11:50 AM	Spectrum • Initiative Update • Process Map Review • Discussion	Jessie Peters
11:50 AM – 12:05 PM	Community Health Associates Initiatives • Initiative Update • Discussion	Stephanie Crawford Victoria Alarcon
12:05 PM – 12:20 PM	Southwest Behavioral Health Services Initiatives • Initiative Update • Discussion	April Thornton
12:20 PM – 12:35 PM	Valleywise Initiatives • Initiative Update • Discussion	Vicki Staples Melissa Thomas Jose Madera
12:35 PM – 12:50 PM	Terros Initiatives • Initiative Update • Discussion	Ray Young, Lori Jones, Lani Horiuchi
12:50 PM – 1:00 PM	Next Steps	Matthew Martin, PhD

TIP Justice Y6 Initiatives

Jessie J. Peters, FNP-BC

Project Strategist

Spectrum Healthcare Group

9.20.22

spectrUm
for mind
for body
for all of you
healthcare

Initiative #1 (all TI concentrations) –
DM screening for all populations on antipsychotics

- Mission
  - Improve overall health of the communities we serve, while decreasing risk factors of disease
  - Improve gap closure for TI, VBP, KPI

- Progress
  - Process Mapping
  - SME and frontline staff
  - POC addition to venipuncture

Initiative Changes and Updates

- SHG is involved in 5 areas of concentration
  - Adult BH (3 locations)
  - Adult PC (2 locations)
  - Pediatric BH (3 locations)
  - Pediatric PC (2 locations)
  - Justice (2 locations)
- 5+ processes for the same goal, streamlined and implemented
- Quite a bit of turnover and restructure with our teams
- Will continue to monitor A1c capture on diabetics and at-risk populations as part of routine KPIs and VBR contracts
- Addition of POC testing reliably at our locations

Next Steps

- Monitor and control internal processes
- Ongoing audits of gap closure and appropriate care management

Community Health Associates

Strengthening Families, Empowering Communities

JUSTICE-INVOLVED TARGETED INVESTMENT CLINICS:

YUMA – CASA GRANDE – TUCSON

Initiative #1

Improve AOD 34-day performance

Given our inability to benefit from data harmonization assistance from the ASU team on the AOD 34-day measure (due to Part II restrictions), CHA will work to improve our internal ability to track, monitor and report out our own performance on the measure.

Barriers to Overcome

- CHA had planned to utilize data harmonization
- Minimal ability to track our own performance
- A lack of formal processes for re-engagement
- Line staff will need to be trained in new processes
- Staffing shortages & COVID surges

Communication & coordination with justice partner agencies like probation and parole will be essential to improved performance.

Steps & Strategies

- Improve ability to track AOD measure internally
- Development of data warehouse report
- Determine if outside AOD Dx & tx is attributed to TIP
- Convene clinical, admin and justice teams to improve process workflows.
- Improve awareness of, and targeted response to, members who miss initial weeks of tx
- Train staff and teams on new workflows; get creative in how trainings are convened/offered

Progress, Problems & Plans

- Improved ability to track AOD measure internally
- Switched EMR's that now gives the ability to provide more timely access to data.
- Brain Trust – Convening clinical, admin and justice teams to standardize process workflows.
- Improved awareness of, and targeted response to, members who miss initial weeks of tx
- Ongoing training of teams on workflows
- Greatest barrier at this point is staffing shortage and turnover
- Teams are working with new HR Director and HR Recruitment Specialist.

Initiative #2

Peer Support & Probation Outcomes

To date, CHA's PFRO partners have proven unwilling and/or unable to provide direct peer support services to TIP clientele.

CHA will increase peer support provision internally to support treatment engagement, limit program attrition and improve probation outcomes (as measured by successful completion vs revocation).

Barriers to Overcome

- To date, CHA has relied entirely on PFRO partner agencies to provide direct peer support services.
- Staffing patterns have been dramatically impacted by COVID and the great resignation.
- A lack of start-up or sustainable funding to support peer positions within the team.
- New line of service and team organization will require planning and re-training.

Yuma County Adult Probation has already agreed to pull and provide us with reports on successful probation terminations vs revocations.

Steps & Strategies

- CHA will no longer rely on PFRO's to provide our clientele with much needed peer support.
- Certified Peer staff need to be identified, re-assigned and trained on new role within team.
- Increase staffing levels to allow for caseload and staff reassignment.
- Identification of eligible peer staff and support them in getting peer certifications.
- Train and improve Peer Support staff's ability to meet production standards to cover costs.
- Train staff and teams on new workflows; get creative in how trainings are convened/offered.

Progress, Problems & Plans

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- Certified Peer staff need to be identified, re-assigned and trained on new role within team.
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- Greatest barrier at this point is staffing shortage and turnover
- Teams are working with new HR Director and HR Recruitment Specialist.

THANK YOU!

Community Health Associates

Strengthening Families, Empowering Communities

SOUTHWEST BEHAVIORAL & HEALTH SERVICES

Impacting People, Improving Communities

TIP Justice Y6 QIC 3 Initiatives

TIP Justice Initiative 1

Goal: Enhance Vocational Coordination and Housing Outcomes for Justice Involved Members.

Implementation:

- Position for vocational Coordinator has been filled and groups are beginning 9/7/2022
- Community Partners Directory and Community Resource Binder is in development: Goal for release is 10/1/2022
- Internal Housing through Karen House and Stairways
  - Transitional Supportive Housing to be opened between 10/1/2022 and 11/1/2022
- Identify and secure grant dollars and/or other non-Medicaid funding opportunities through Northern Arizona Municipalities and other sources.
- Identified barrier between member release and relapse/recidivism met with implementation of Community Outreach Navigator

Barriers:

- Workflow and data collection plan
- Funding for additional housing options

Roadmap to Success

Secure Funding

Grants and reimbursable services

Data Collection

Determine what data to collect and how to track efficiently.

Community Partners

Identify and Collaborate

Assess

Assess the current plan and revise as needed to improve quality outcomes.

Maintenance

Continued assessments and implementation.

Housing Options

Obtain various housing options that meet the need of individuals and **families.**

Progress:

Community Partners

- Mohave County Consortium sponsored by RCORP occurring quarterly.
- Partnership with Mohave County jail re-entry program.
- Partnership with Mohave County Housing Authority
- Development of Service Directory by 10/1/2022

Vocational Coordinator

- Position filled
- Groups established 9/7/2022
- Groups to be held on site at transitional living homes.

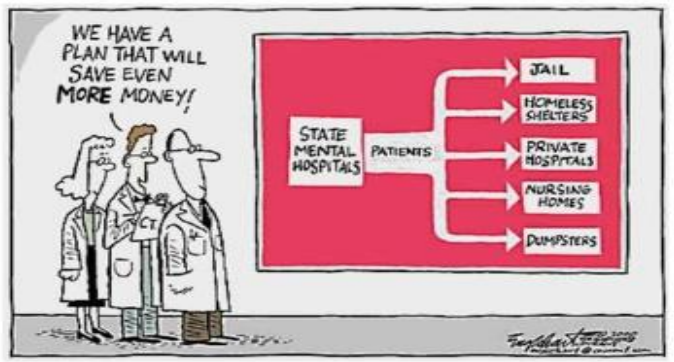
Workflow and Data collection

- Workflow established for jail transition Initiative 2.
  - Data collection on recidivism to be determined.
- Workflow on transitional living and vocational support to be developed with program launch October 2022.

Secure Housing and Funding

- Initial internal housing
- Partnership with government housing agencies
- Continuation of grant housing options are still being pursued.

TIP Justice Initiative 2



Goal: enhance community re-entry after jail release for justice involved members through identifying and establishing key performance indicators related to coordination of care for members that are booked into jail at any time throughout the course of treatment.

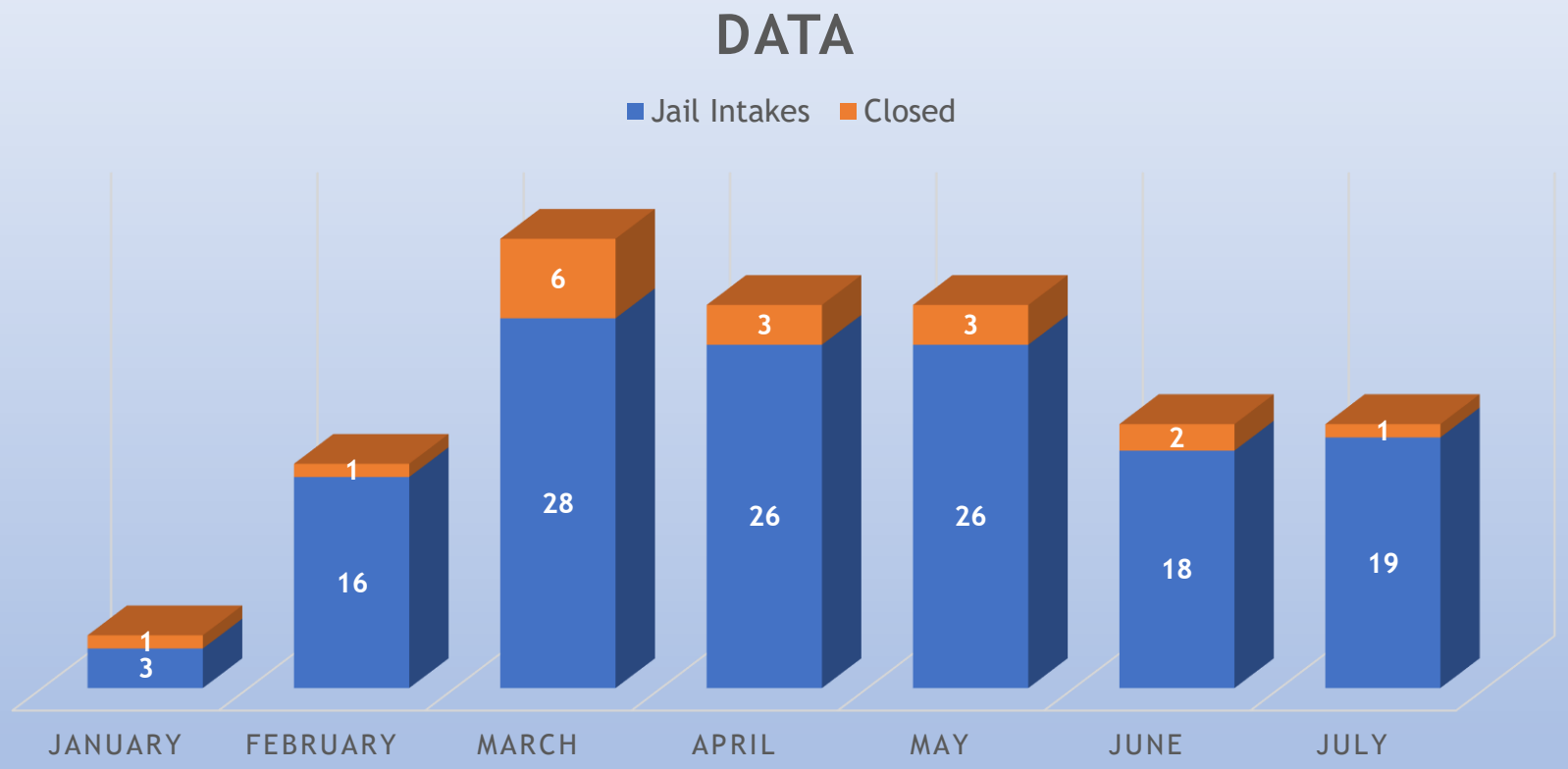
Implementation:

- Jail Transition Workflow has been established and creation of additional role of Community Outreach Navigator
- Collaboration with MCSO
- Stakeholders involved for treatment support options
- Data collection to include recidivism outcomes

Barriers:

- High volume of requests
- Limited means to engagement while incarcerated
- Limited resources: transitional living, sober living, housing, etc.
- Tracking of Outcomes

Jail Transitions to date:



Closed- This occurs due to the following: Member is remanded to Department of Corrections or does not engage post release and has gone through the AHCCCS re-engagement process.

TIP Justice Initiative 3

Goal: develop a reoccurring meeting with justice stakeholders and TI Justice engaged providers in the Mohave County region with the objective of defining and accomplishing shared goals.

Implementation

- Rural Communities Opioid Resources Program (RCORP) initiated first Mohave County Consortium that included all stakeholders. Consortium to take the place of multiple small meetings and host one large group meeting/discussion.
- Relationship established with Mohave County Housing Authority

Barriers

- Continued collaboration on a large scale
- Addressing gaps in care vs. individual service provider goals.
- Overdose Fatality Review Team identified coordination of care as the most significant factor in overdose fatalities in Mohave County.

Target Goals:

Short-Term
Implementation of Community Outreach Navigator to close gaps on released members relapse and recidivism.
Extract data for jail transition to include: Recidivism rates
Develop stakeholder/community directory by 10/2022 in addition adding Community resource binder for members
Long-Term
Assess and analyze data collection with workgroups
Secure housing funds that reduce the financial impact on state Medicaid.
Maintain consistent collaborative meetings with justice stakeholders.
Partner directly with MCSO at the jail re-entry building

January 2022, Revised May 2022, September 2022

Valleywise Health Targeted Investments Program Justice Initiative Tracker

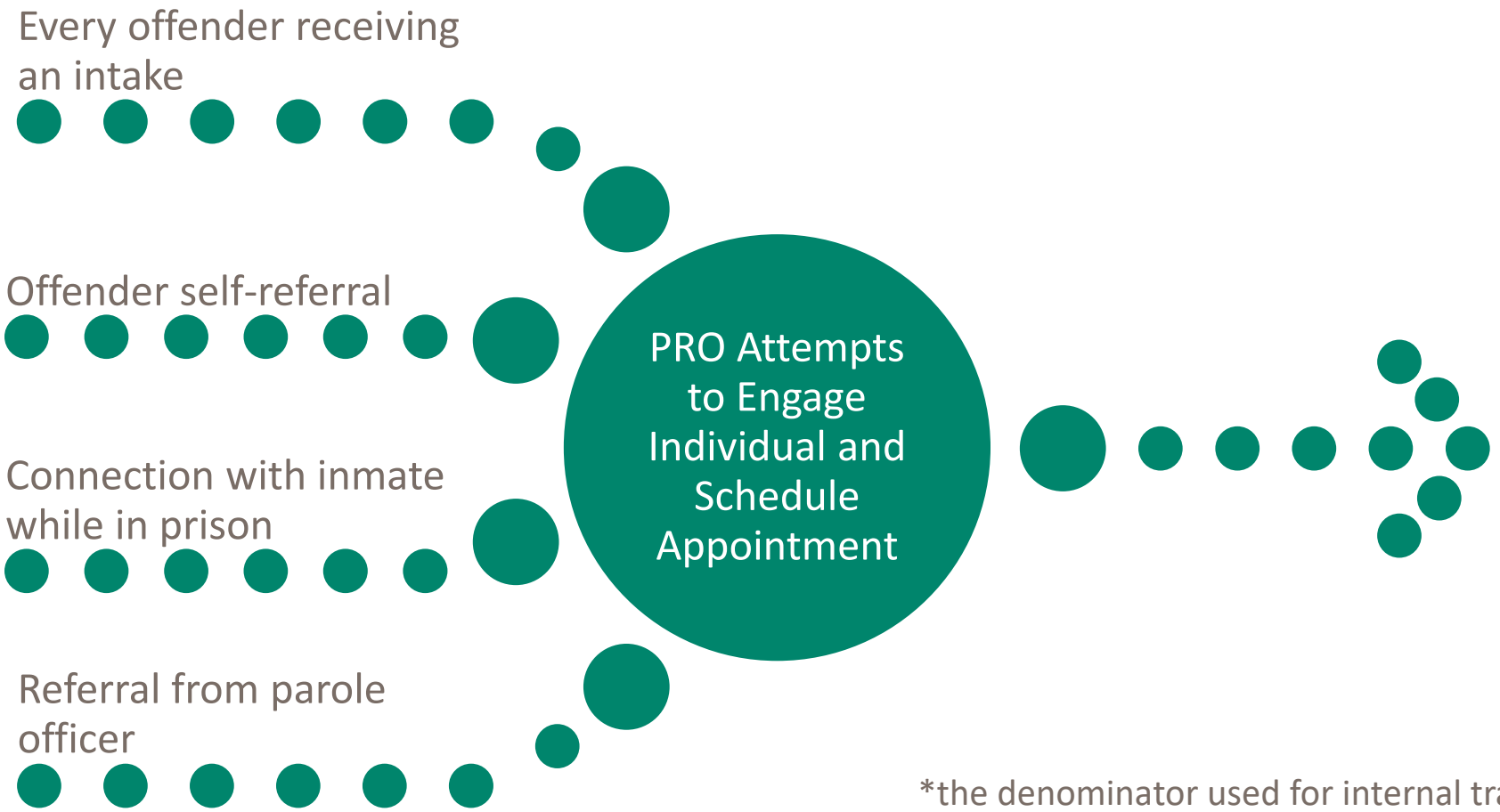
Justice Initiatives Recap

1) Improve data collection with Peer Run Organizations

2) Automate reporting capabilities

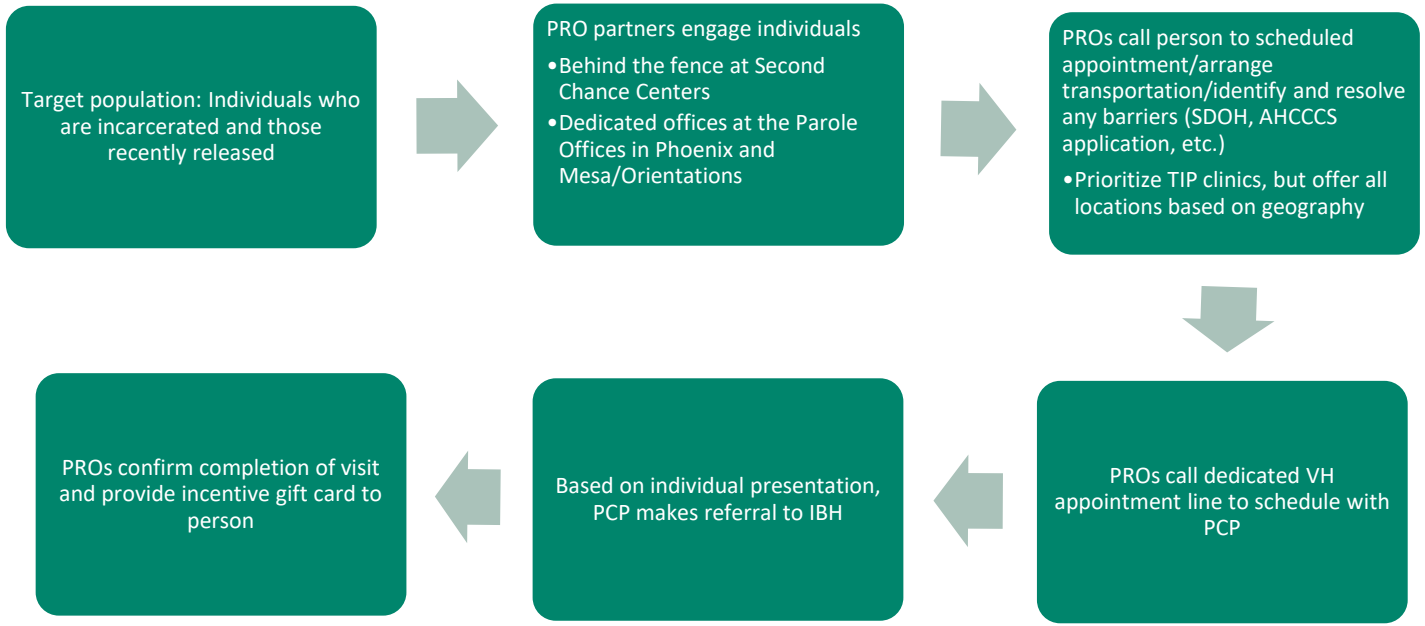
3) Elevate importance of connection to whole health services to inmates and offenders

TIP Justice Referrals



*the denominator used for internal tracking and monitoring of penetration rate improvement currently includes ALL offenders attending orientation

TIP Referral Process



TIP Justice Barriers and Resolutions Since Inception

Need to Engage Offenders

- Offenders don't always trust "professionals"
- Contracted with 3 PROs to engage
- Offenders more responsive to others with lived experience
- PROs go behind the fence and to every orientation at both Phoenix and Mesa Parole Offices

Healthcare is Not Top Priority for Offenders

- Recently released individuals want to see family and friends and fulfill the requirements of their release. Seeking healthcare is not a requirement.
- Created health literature and incentive program for completion of first appointment.

Offenders are Released Across Maricopa County

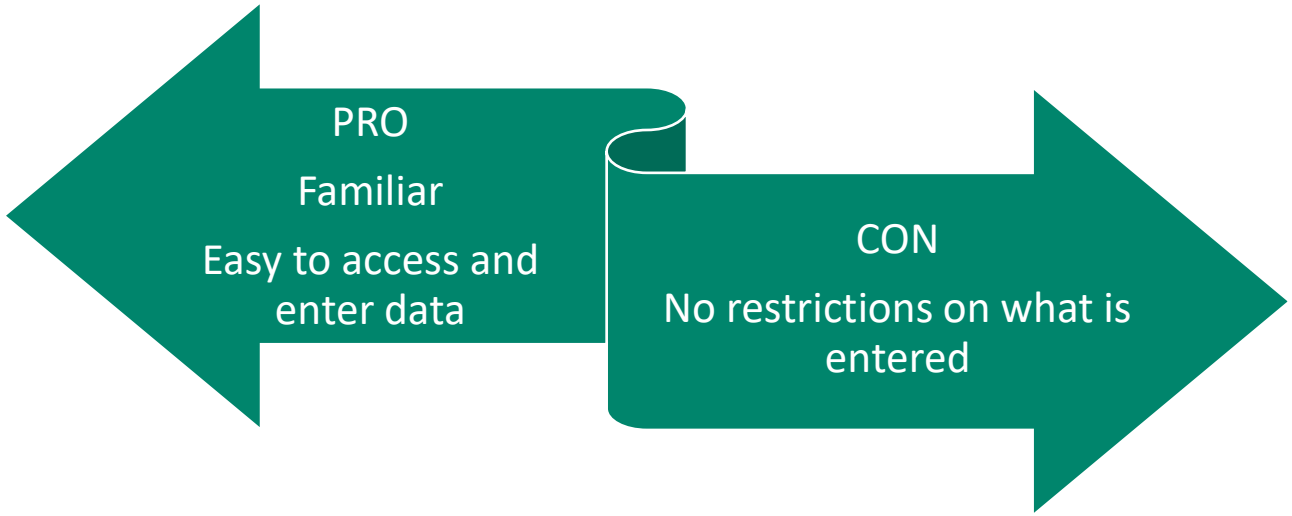
- Many offenders do not live near the 3 TIP clinics
- We offer appointments at all of our clinics,
- This is what is right for the individual even though they don't "count" as TIP and we don't receive incentives for their visits

Initiative 1:

Improve Data Collection with Peer Run Organizations

1) Improve Data Collection with Peer Run Organizations

- Valleywise Health (VH) partners with 3 Peer Run Organizations (PROs) – CHEEERS, Hope Inc. and Hope Lives to engage inmates and offenders recently released from prison
- The PROs jointly designed a shared spreadsheet that they use secure through Google docs to gather member information



QC Example

Remind

Project manager reminds PROs to double check the tracker to include all entries for the month, and to QC their work, especially the fields that are submitted to AHCCCS, CHiR, and internally to VH IT

Examine

Project manager downloads the spreadsheet

Deletes the color coding the PROs use for tracking

Uses formulas and conditional formatting to identify outliers (e.g. dates, AHCCCS ID character length, etc.)

Fix

Fix all obvious errors (e.g. dates)

Attempts to fix non-obvious errors by looking up:

- ADC numbers on the Inmate Datasearch
- AHCCCS IDs through AHCCCS portal

PRO Help

Go back to PROs to ask them to fix all remaining errors

1) Improve Data Collection with Peer Run Organizations

Our goal is to decrease manual processes and improve quality of information

We will:

- Work with the PROs to complete in-depth research and analysis regarding what is available within the spreadsheets we are already using, or otherwise available in the market
- Complete training
- Shift to new data collection tool/methodology

1) Improve Data Collection with Peer Run Organizations

Our goal is to decrease manual processes and improve quality of information

Tasks Completed:

- Explored options internally to allow access to EHR for PROs
- Shifted oversight and QC of PRO tracker to VH staff, with goal of full automation
- Created new template with edits that disallow invalid entries (e.g., date, AHCCCS ID length)
- Provided ongoing TA to PROs through regular meetings (every other Friday)

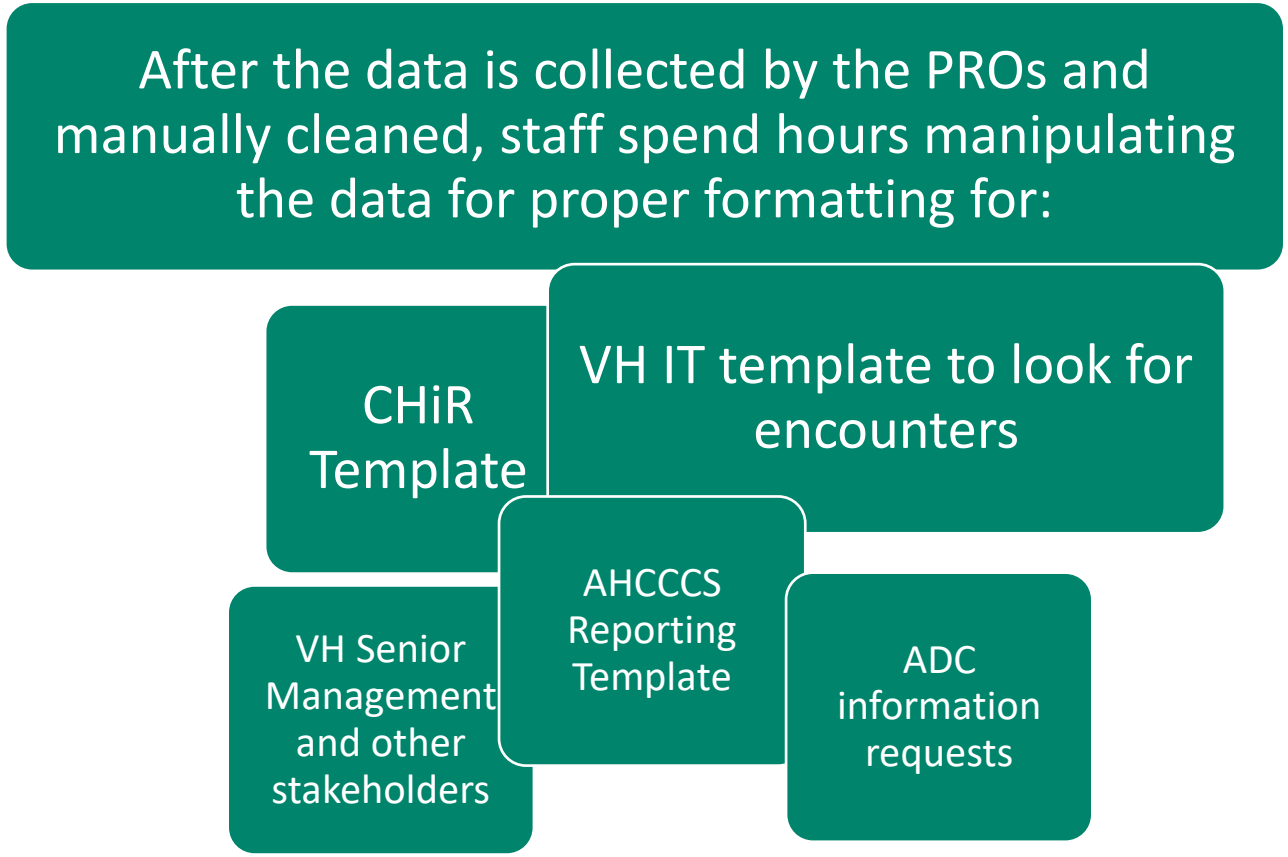
Status as of September 2022:

- External access to EHR not a viable option
- Worked collaboratively with the PROs to eliminate unused columns in tracker
- Continued ongoing TA

Initiative Two:

Automate Reporting Capabilities

2) Automate Reporting Capabilities



2) Automate Reporting Capabilities

Goal:

In collaboration with the PROs, we hope to either enhance what we use now or find a tool for Initiative 1 that also has robust reporting capabilities

2) Automate Reporting Capabilities

Tasks completed:

- Design and oversight of the PRO tracker has been absorbed by VH staff, one with background and expertise in data analysis and reporting
- VH staff continue to make improvements in the template and are building reports
- Explored other template options

Status as of September 2022:

- Hosting on VH platform not viable
- In process of eliminating unused columns in tracker to streamline entry and reduce errors

Initiative 3:

Elevate importance of connection to whole health services to inmates and offenders

3) Elevate importance of connection to whole health services

- Our PRO partners extensively engage staff and inmates within the prisons and Parole Officers and offenders at both the Mesa and Phoenix Parole Offices
- Special VH referral line for TIP Justice which offers immediate access to scheduler with prioritized availability of appointments
- Offenders have a list of priorities when they are released, and seeing a doc is generally not at the top of their list

3) Elevate importance of connection to whole health services

- We hope to develop a meaningful education and incentive program to increase the penetration rate

3) Elevate importance of connection to whole health services

Tasks completed:

- PROs offer $40* gift card for appointment completion
- Narcan kit distribution at both Phoenix and Mesa orientations
- Establish collaboration with Re-Entry Center and Tucson Prison
- Identified IBH staff that will assist at orientations
- Updated engagement form included in orientation packet

Status as of September 2022:

- Issues with gift cards- identified one PRO lead
- Reduced gift card amount to $25
- Continued collaboration behind the walls with the prisons

TIP Justice QIC

Terros Health

Sept 13, 2022

Initiative 3: Enhance Health Literacy education for Justice Population to increase understanding of Primary Care.

Description

- Improve and provide health literacy preventive and primary care education among Justice Population to strengthen patient knowledge and encourage whole health

Value

- Increase knowledge
- Decrease hospital and ER visits
- Create better health outcomes
- Improve quality of life

Initiative 3: Health Literacy

Anticipated Barriers	Updates
Identify venues	Started piloting in groups at 27th Ave
Identify method to track outcomes	Started using tracker that identifies date, location, pre and post test knowledge change
Overall planning and implementation	Piloted with BTG and TIP staff, began using curriculum, expanding to use in community

Initiative 3: Health Literacy

Long-Term Strategy

- Work with Reentry team to identify best venue for this education
- Identify project manager or coordinator to lead
- Create a way to measure, identify how this will be tracked and by who

Updates

All of these items have been completed, additional long term strategies include future plans for venues in jails, etc.

Value

- Assists stakeholder clients by equipping them with knowledge regarding how to get PCP appointments, the importance of having a PCP, and preventive care- which leads to better outcomes for clients in many areas

THANK YOU!

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Inspiring Change for Life

Next Steps

- Questions or concerns?
  - Please contact ASU QIC team at TIPQIC@asu.edu if questions or concerns regarding performance data

Thank you!

TIPQIC@asu.edu