Oklahoma
One State's Journey toward Quality Data

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Oklahoma Dept. of Mental Health & Substance Abuse Services

Oklahoma Data Management History

- Robust established data system
  - Fee-For-Service
  - Believed established = Good
  - National Outcome Measures (NOMs)

NOMs Data Quality

- Change in Percent of Clients **Arrested** from Admission to Discharge
  - Score: Reduction of 3.1%
  - Oklahoma ranks 27 of 29

- Change in Percent of Clients Reporting **Employment** from Admission to Discharge
  - Score: Change of 2.3%
  - Oklahoma ranks 27 of 38

- Change in Percent of Clients Reporting Abstinence from **Alcohol** from Admission to Discharge
  - Score: Reduction of 11.6%
  - Oklahoma ranks 30 of 39

Days since last CDC update

- 38,953 Active Clients (MH & SA)

- 24,273 with LOS > 180 days
  - 10,119 (42%) only have an admission record
  - 5,713 (24%) have not had an update >180 days

- So, only about 34% of clients have useable data
  - Varies by agency

The Big 6 at 6

- Understanding the intent of the data is essential.

- Explain the connection between data and outcomes.

OKLAHOMA DEPARTMENT OF MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES
CLIENT DATA CORE

SECTION I

Agency No. ☐☐ Satellite No. ☐ Date Transaction Occurred ☐☐☐☐☐☐☐☐ Time (Military) ☐☐☐☐ Transaction Type* ☐☐

Client ID ☐☐☐☐☐☐☐☐☐ Birth Year ☐☐☐☐ Service Focus (01-22*) ☐☐

CLIENT RACE: (1 = Yes for all that apply/Blank = No)

White ☐ Asian ☐ American Indian ☐

Native Hawaiian or Other Pacific Islander ☐

Black/African American ☐

ETHNICITY: (1 = Yes/2 = No)

Hispanic/Latino ☐ (If only H/L, then White European)

SCREENING INFORMATION:

(1 = Pos/ 2 = Neg/ 3 = Not Admin)   (1 = Yes/ 2 = No)

Mental Health Screen ☐ Tobacco Use ☐

Substance Abuse Screen ☐ Chronic Homeless ☐

Trauma Screen ☐ Other _____ ☐

PRIMARY REFERRAL:* ☐☐ AGENCY #: ☐☐☐

SECONDARY REFERRAL:* ☐☐ AGENCY #: ☐☐☐

COUNTY OF RESIDENCE: (01-77 or Other State Initial) ☐☐

ZIP CODE: (Current Address/ 99999 for Homeless) ☐☐☐☐☐

SECTION II

CLIENT SSN: ☐☐☐☐☐☐☐☐☐

CURRENT RESIDENCE: ☐
A. Permanent Housing
B. Perm Sup Hous-Non-Cong
C. Perm Sup Hous-Cong   H. Institutional Setting
D. Transitional Housing   I. Homeless-shelter
E. Temporary Housing   J. Homeless-streets
F. RC Facility/Group Home
G. Nursing Home

LIVING SITUATION: ☐
1. Alone   3. With Non-Related Persons
2. With Family/Relatives 4. With Batterer

EMPLOYMENT: ☐
1. Full-time   3. Unemployed
2. Part-time   4. Not in Labor Force = (T.o.E.: A-F)

TYPE OF EMPLOYMENT/ Not in Labor Force: ☐
1. Competitive   A. Homemaker
2. Supported   B. Student
3. Volunteer   C. Retired
4. None   D. Disabled
5. Transitional   E. Inmate
6. Sheltered Workshop   F. Other

IN SCHOOL?:   (1 = Yes/ 2 = No) ☐

MARITAL STATUS: ☐
1. Never Married 3. Divorced   5. Living as Married
2. Married   4. Widowed   6. Separated

Is Client **PREGNANT?:** (If Yes enter 1-9 or 0 for No) ☐

Is Client in Prison or Jail?: ☐
1. Prison   2. No   3. Jail

ANNUAL INCOME: $☐☐☐☐☐☐

Number contributing to and/or dependent upon "Annual Income" above: ☐

SSI: ☐   (1 = Yes/ 2 = No)   SSDI: ☐

INSURANCE: (1 = Yes/2 = No)

Medicare: ☐   Medicaid: ☐

SECTION III

LANGUAGE PROFICIENCY:

Does Client speak English well?: (1 = Yes/2 = No) ☐

If no, what language is preferred?: (1-9*) ☐

If 2 or 9, then specify: _____

VETERAN STATUS: (1 = Yes/2 = No) ☐

EDUCATION: ☐☐
(Highest Grade Completed 01-25) or 00-Less than 1 grade completed, 97-Unknown, or 98-Not Collected

HANDICAP: (01-11 or Blank) ☐☐☐☐☐☐

LEGAL STATUS: ☐☐ County of Commitment: ☐☐

	Primary	Secondary	Tertiary
PRESENTING PROBLEM:*	☐☐	☐☐	☐☐
Drugs Of Choice:*	☐☐	☐☐	☐☐
Usual Route of Administration:*	☐	☐	☐
Frequency Of Use in Last 30 days:*	☐☐	☐☐	☐☐
Age First Used:	☐☐	☐☐	☐☐

LEVEL OF CARE: (CI, CL, HA, OO, SC, or SN*) ☐☐

SECTION IV
(Complete only for Mental Health and Substance Abuse Clients 18 years old or younger)

a. Is this child in the custody of (1 Yes/2 No)?

OJA ☐   DHS ☐

b. Is child enrolled in special education? ☐

c. In what type of out-of-home placement is the child living? (select only one) ☐
1. Not in out of home placement   4. Foster Care
2. Residential Treatment   5. Group Home
3. Specialized Community Group Home

SECTION V

CURRENT LOF: (GAF SCALE)   (01-99*) ☐☐

CAR: (Mental Health)   (01-50)

Feeling Mood	☐☐
Thinking	☐☐
Substance Use	☐☐
Medical/Physical	☐☐
Family	☐☐
Interpersonal	☐☐
Role Performance	☐☐
Socio-Legal	☐☐
Self Care/Basic Needs	☐☐

TASI: Under 18 (Scoring: 0 - 4)

ASI: (Substance Abuse) (X)

Medical	☐.☐☐	Chemical	☐
Employ/Support	☐.☐☐	School	☐
Alcohol Use	☐.☐☐	Emp/Sup	☐
Drug Use	☐.☐☐	Family	☐
Legal Status	☐.☐☐	Peer/Soc	☐
Family/Social Rel.	☐.☐☐	Legal	☐
Psychiatric Status	☐.☐☐	Psychiatric	☐

(For client older than 18)   (For client 18 or less)

SMI: (1 = Yes/2 = No) ☐   SED: (1 = Yes/2 = No) ☐

In the past 30 days, how many times has the client been arrested or since admission if less than 30 days? ☐☐

In the past 6 months, how many times has the client been arrested or since admission if less than 6 Months? ☐☐

FAMILY ID, Drug Court, DOC #, or DHS Case Number: ☐☐☐☐☐☐☐☐☐

NAME: Legal: _____ Maiden: _____ First: _____ Middle: _____ Suffix: _____

CLIENT ADDRESS: (1) _____ (2) _____ CITY: _____ STATE: _____

Current Efforts

- Data Integrity Review Teams

- Performance Improvement Reports

- E-Learning Module

- Changes in Data Reporting

Data Integrity Review Teams (DIRT)

- Started 7/15/2007

- What we do?
  - Show the provider how to use reports
  - Data walk-through
  - Discussion with clinicians

Data Integrity Review-Planned and Completed Visits
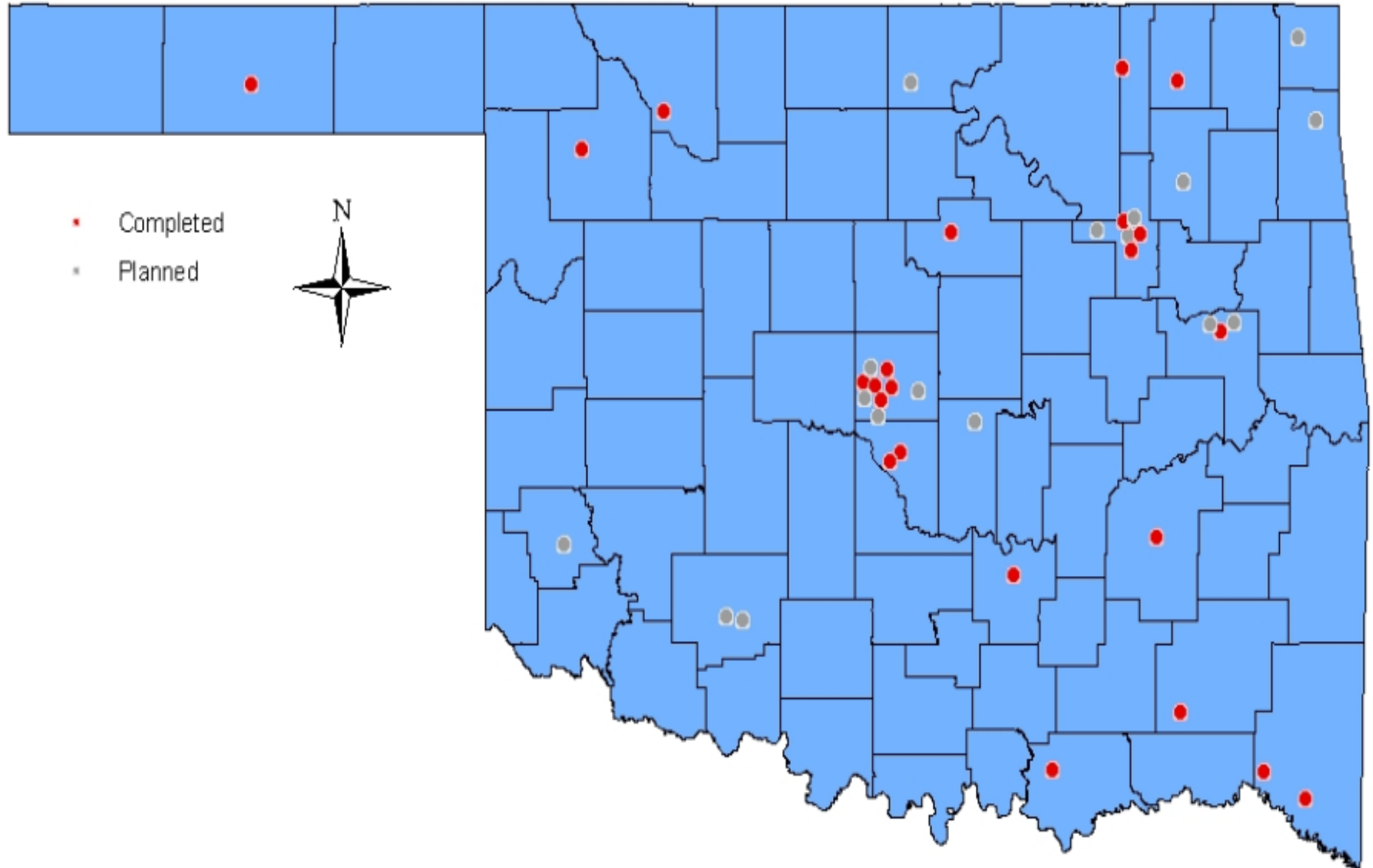
Reduction in Frequency of Substance Use
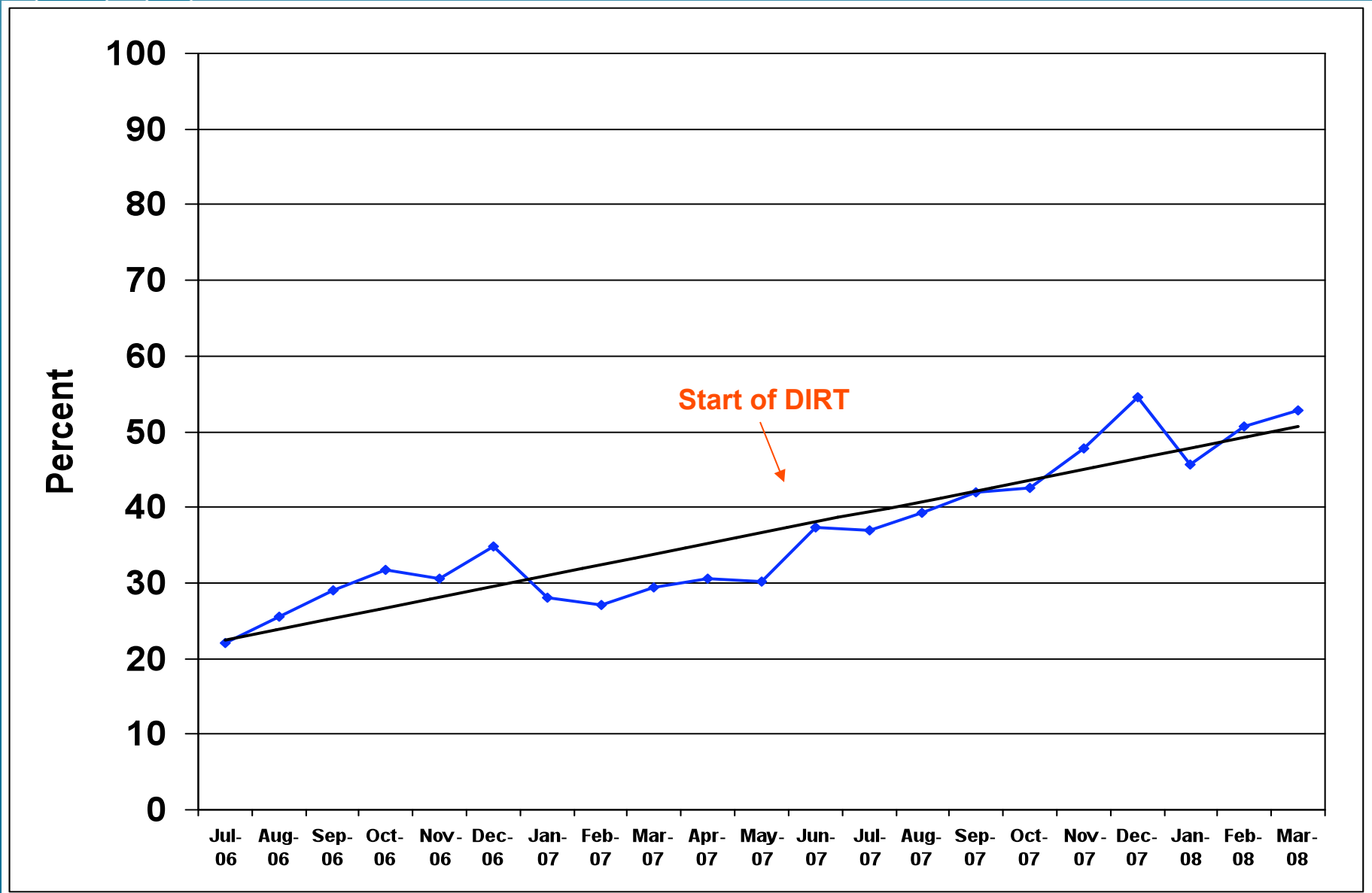
Reduction in Number of Arrests in Past 30 Days
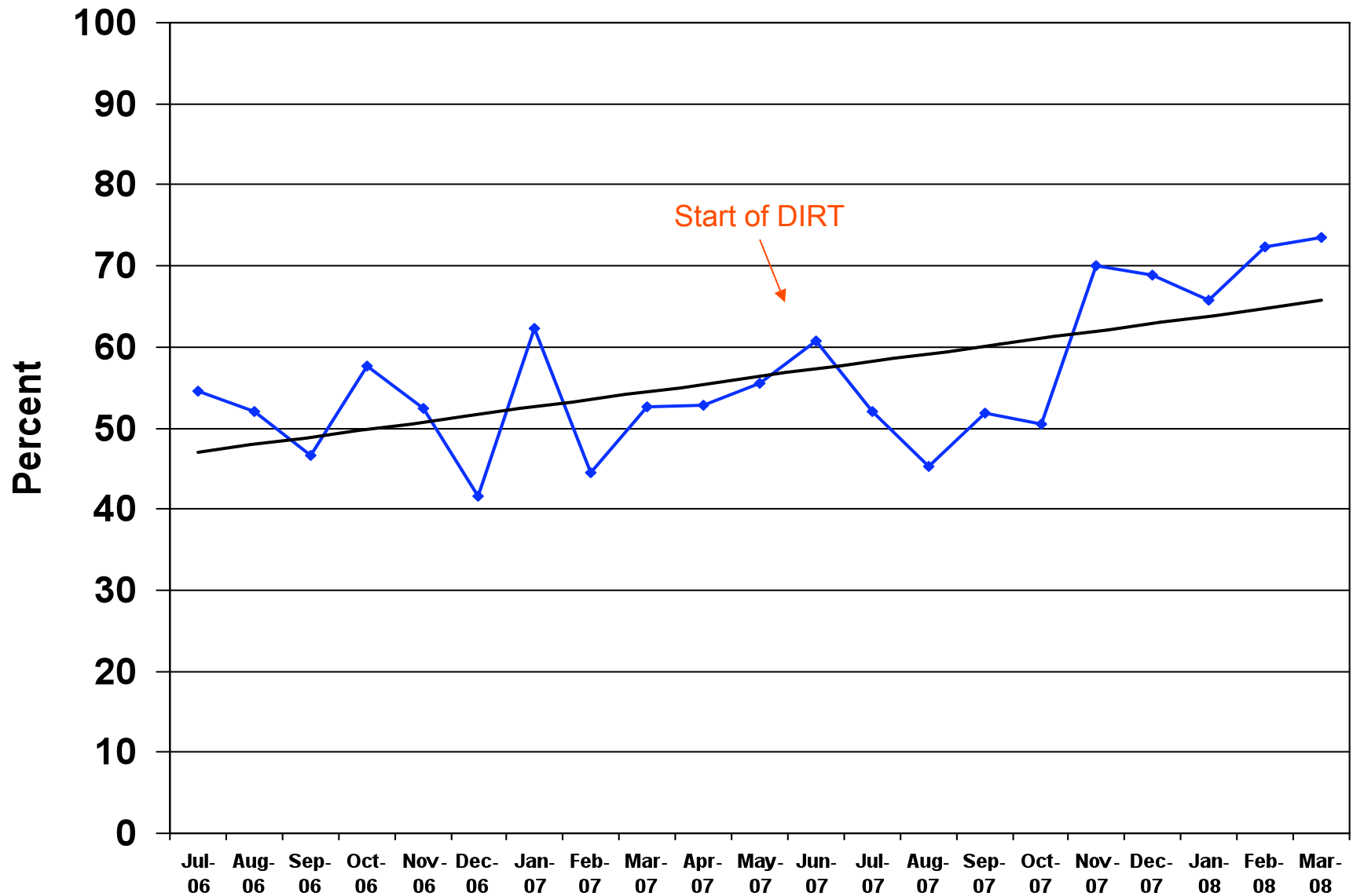
Reduction in Unemployment
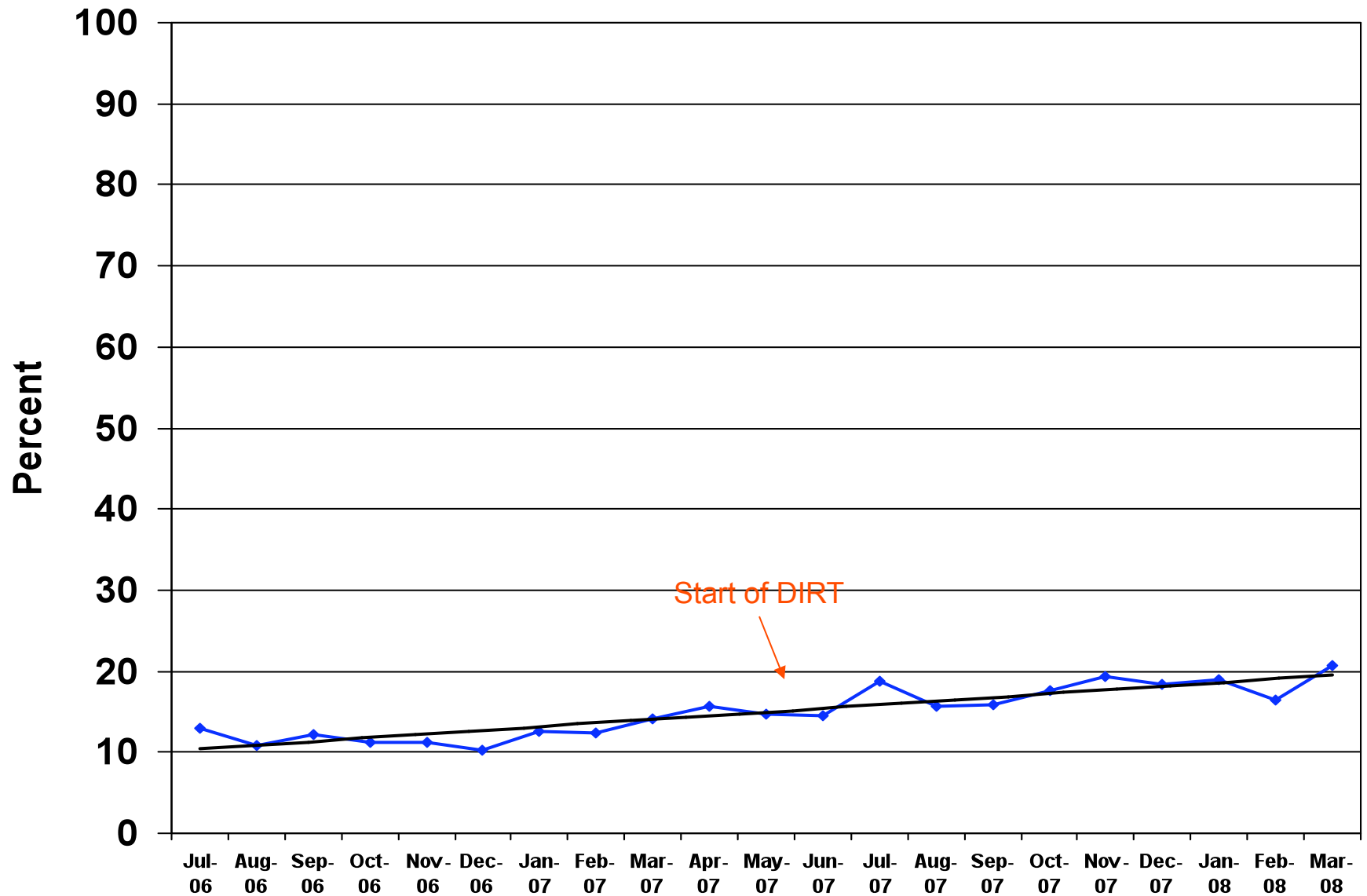
Do cybernet reports actually gather dust?

YES!!

Performance Improvement Reports

- Pie Chart

- Trend Line

- Agency Ranking

- Drill-Down Report

- Provider Performance Management Report (PPMR)

- STAR Reports

- STAR Plus Reports

Report #: CMHC 230P

Substance Use - Pie Chart

Reduction in Frequency of Substance Use for Individuals Active in Outpatient Treatment on 12/31/2007
Or Discharged between 01/01/2007 and 12/31/2007

Agency: (554) GRAND LAKE M.H.C.
Contact Source: (01) COMMUNITY MENTAL HEALTH
Age Group: Adults (18+)

| Active Plus Discharged Individuals	GRAND LAKE M.H.C.							Systemwide						
	Count				Percent			Count				Percent		
	Excluded	Increase	No Change	Reductio	Increase	No	Reductio	Excluded	Increase	No Change	Reductio	Increase	No Change	Reductio
Active Clients	562	3	57	41	3.0%	56.4%	40.6%	9,138	60	1,419	706	2.7%	64.9%	32.3%
Planned	2	0	0	2	0.0%	0.0%	100.0%	346	6	40	53	6.1%	40.4%	53.5%
Unplanned	180	0	33	7	0.0%	82.5%	17.5%	2,271	23	631	181	2.8%	75.6%	21.7%
Other	118	0	19	8	0.0%	70.4%	29.6%	692	7	131	78	3.2%	60.6%	36.1%
Total	862	3	109	58	2.0 %	64.1%	34.1%	12,447	96	2,221	1,018	2.9 %	66.6%	30.5%

Change in Frequency of Substance Use

Increase 1.8% Reduction 34.1% No Change 64.1%

Change in Frequency of Substance Use

Increase 2.9% Reduction 30.5% No Change 66.6%

Questions? Please call Mark Reynolds at (405) 522-3824 or Shailendra Kumar at (405) 522-1328.

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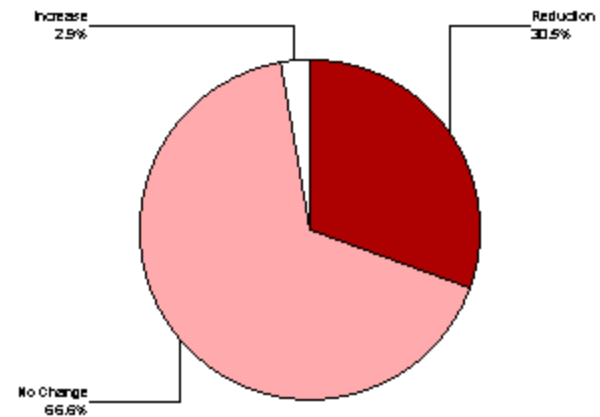
Report #: CMHC 230D

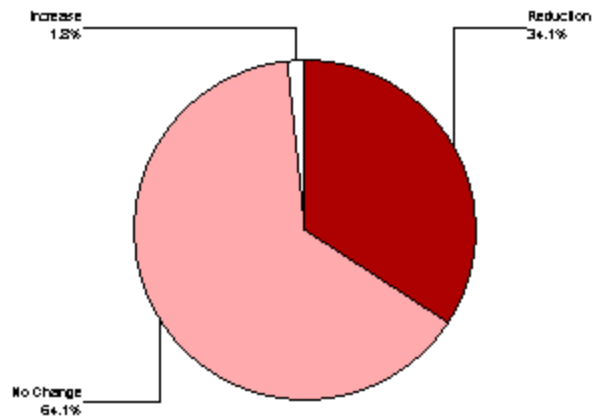# Substance Use - Drill Down Report

Reduction in Frequency of Substance Use for Individuals Active in Outpatient on 12/31/2007
or Between 01/01/2007 and 12/31/2007 at GRAND LAKE M.H.C.

Level of Care: Outpatient

Age Group: Adults (18+)

Contract Source: All Mental Health Contract Sources

Active + Discharged	Number			Percent	
	Excluded	No Change	Reduction	No Change	Reduction
Active	898	65	72	47.4%	52.6%
Planned	7	0	3	0.0%	100.0%
Unplanned	262	36	10	78.3%	21.7%
Other	176	21	11	65.6%	34.4%
Total	1,343	122	96	56.0%	44.0%

Contract Source: All Mental Health Contract Source except 01

Active + Discharged	Number			Percent	
	Excluded	No Change	Reduction	No Change	Reduction
Active	519	31	45	40.8%	59.2%
Planned	7	0	1	0.0%	100.0%
Unplanned	115	8	3	72.7%	27.3%
Other	79	2	6	25.0%	75.0%
Total	720	41	55	42.7%	57.3%

Contract Source: (01) COMMUNITY MENTAL HEALTH

Active + Discharged	Number			Percent	
	Excluded	No Change	Reduction	No Change	Reduction
Active	562	57	41	58.2%	41.8%
Planned	2	0	2	0.0%	100.0%
Unplanned	180	33	7	82.5%	17.5%
Other	118	19	8	70.4%	29.6%
Total	862	109	58	65.3%	34.7%

Contract Source: (50) MEDICAID SERVICES FOR WHICH DMHSAS PAYS MATCH (ADULTS)

Active + Discharged	Number			Percent	
	Excluded	No Change	Reduction	No Change	Reduction

CMHC Performance Management Report (CMHC-PPMR)

Agency: (554) Grand Lake MHC

Contract Source: All Mental Health Contract Sources

Age Group: Adults (18+)

Time Period: 04/01/2007 to 03/31/2008

Level of Care	Measure	Systemwide Score	Agency Score	Agency Numerator	Agency Denominator	Agency vs Systemwide	Rank	Quartiles Bottom	Middle 2	Top	Agency Score	Agency Numerator	Agency Denominator	Current vs Previous
						Current Time Period (04/01/2007 to 03/31/2008)							**Previous Time Period (04/01/2006 to 03/31/2007)**	
National Outcome Measures (NOMs) - http://www.nationaloutcomemeasures.samhsa.gov/														
Outpatient	Increased Level of Functioning (1 Pt.)	37.9	53.3	856	1,607	↑	3 of 15			☺	50.9	664	1,304	👎
	Increased Level of Functioning (5 Pts.)	25.5	28.0	450	1,607	↑	6 of 15		☺		31.6	412	1,304	👎
	Reduction in Arrests (Past 30 Days)	58.9	63.9	23	36	↑	5 of 10		☺		10.7	3	28	👎
	Reduction in Arrests (Past 6 Months)	56.1	53.9	35	65	↓	6 of 11		☺		14.9	7	47	👎
	Reduction in Homelessness	50.6	79.5	31	39	↑	2 of 15			☺	73.3	22	30	👎
	Reduction in Substance Use	39.5	52.6	122	232	↑	4 of 15			☺	37.2	73	196	👎
	Reduction in Unemployment	9.0	7.3	26	355	↓	9 of 15		☺		3.0	9	305	👎
Data Quality Measure (DQMs)														
All Levels	No CDC Update in 180 Days	49.1	89.2	2,116	2,372	↑	1 of 15			☺	91.2	1,744	1,912	👎
	No Service in 180 days	80.2	99.0	1,329	1,342	↑	2 of 15			☺	99.4	1,159	1,166	👎

Indicator Summary	Agency Compared to the State	Rank/Quartile	Agency Compared to Previous Period
	↓ = 2 ↑ = 7	Bottom ☹ = 0 Middle 2 😐 = 4 Top ☺ = 5	👎 = 3 👍 = 6

STAR + Report, Aug07-Jan08

Month	Contacts	Assess after Contact	Assess Conversion Rate	Avg. Days Contact to Assess	Assess without Contacts	Total Assess	Admits	Admit Conversion Rate	Avg. Days Assess to Admit
Aug07	3	1	33%	21	67	68	41	60%	1
Sept07	48	24	50%	5	58	82	39	48%	2
Oct07	82	60	73%	2	36	96	58	60%	1
Nov07	54	28	52%	3	30	58	43	74%	0
Dec07	36	17	47%	2	23	40	26	65%	1
Jan08	83	57	69%	1	37	94	62	66%	1

Month	Total Admits	Tx1	Tx Conversion Rate	Avg. Days Admit to Tx1	Tx2	Tx3	Tx4	30-Day Continuation	45-Day Continuation
Aug07	49	34	69%	6	24	21	16	47%	60%
Sept07	47	40	85%	5	37	28	23	58%	66%
Oct07	66	53	80%	5	50	40	35	66%	74%
Nov07	54	43	80%	5	37	25	17	40%	51%
Dec07	26	21	81%	7	18	14	12	57%	71%
Jan08	66	55	83%	6	48	38	31	56%	71%

E-Learning Module for Data Reporting

- Accessible through the Internet

- Targeted towards busy clinicians

- Broken into modules
  - Introduction to NOMs
  - Client Data Core Review
  - PI Reports Review

- Total completion time of one hour

One more change...

- Adding "clinician of record" to the Client Data Core.

Lessons Learned

- Data must be meaningful.

- Talk to the right people - tell them the right things.

- Develop a "data quality" culture.

- Data quality improvement must be continuous and from all angles.

- This is a journey, not a destination.

A New Path on Our Journey: Data Partnerships with Providers

- Micro vs. Macro data collection

- Once again, good partnerships are essential.

Questions?

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