

PROVIDER'S QUALITY IMPROVEMENT PLAN

As part of Blair County's Quality Enhancement Action Plan, Providers will be asked to demonstrate quality improvement plans and progress in achieving indicators related to the priorities in the County Plan. These priorities shall be negotiated annually between the county and contracting providers.

Current ongoing priorities include:

Activities identified in the Charter Document for CCISC implementation, as listed below

- a. Formal commitment to engage in Blair County's performance improvement process to achieve DDC for all programs
- b. COD Capability Certification can and should be seen an outcome of the performance improvement process.
- c. Regular participation in Blair committees overseeing and designing this process as indicated
- d. Annual self assessment using CCISC toolkit, or as otherwise negotiated.
- e. Annually updated action plan demonstration of achievement of measurable objectives regarding welcoming individuals and families with cod, universal screening, and reporting of accurate data regarding co morbidity.
- f. Commitment to adopting a scope of practice for all clinical staff regarding co morbidity, and identification of a plan for achieving core competencies based on this scope of practice
- g. Other indicators as negotiated annually.

Other QI activities are included in the attached Co-Occurring Disorder Action Plan last revised 4 -3-08 :

## CO-OCCURRING DISORDER ACTION PLAN

Date: March 2008

Agency: Home Nursing Agency

Programs: Behavioral Health Services

Toolkit Used: Compass

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*Note: Action level specifies which area is being addressed. System, Program, Clinical Practice, or Clinical Competency, to accomplish the goal indicated. Definitions: System is defined as that work that the county system as a whole needs to do in order to support the stated goal. Program is defined as the operational, administrative work of your service. Clinical Practice relates to general clinical approaches and Clinic Competency relates to the work required to improve the competency of clinicians working in your program.*

#	Goal	Action Level	Objectives	Detail Activities	Status	By
1.	Integration of service delivery within the Agency.	System Program	Develop a mission statement for behavioral health integration of service delivery within the Agency reflecting a welcoming, empathetic and integrated approach to treatment.	<ol style="list-style-type: none"> <li>Directors to draft mission statement.</li> <li>Review with staff.</li> <li>Adopt &amp; implement.</li> <li>Disseminate to all staff.</li> <li>Evaluate all policies and procedures to add CCISC language.</li> <li>Complete or re-evaluate COMPASS: Adult Program Children's Program.</li> <li>Update work plan with COMPASS results.</li> </ol>	<ol style="list-style-type: none"> <li>Completed</li> <li>Completed</li> <li>Completed</li> <li>Completed</li> </ol>	<ol style="list-style-type: none"> <li>Adult-- 9/08</li> <li>Children's 8/08</li> <li>10/08</li> </ol>
		Clinical Practice	Offer diversity across licensed programs and levels of care and provide additional enhanced treatment options.	<ol style="list-style-type: none"> <li>Develop workgroup.</li> <li>Cost/benefit analysis.</li> <li>Develop integrated group structure plan.</li> <li>Develop program specific policies and procedures for urine screening.</li> <li>Review with staff.</li> <li>Complete Code-Cat with staff.</li> <li>Implement integrated group structure.</li> </ol>	<ol style="list-style-type: none"> <li>Completed</li> <li>Completed</li> <li>Completed</li> <li>Completed</li> <li>Completed</li> <li>Partially completed</li> <li>Completed</li> </ol>	<ol style="list-style-type: none"> <li>6. 2/09</li> </ol>
		Clinical Competency	Provide integrated staff training on CCISC.	<ol style="list-style-type: none"> <li>Continue ongoing trainings for co-occurring disorder.</li> <li>Develop curriculum for children's staff.</li> </ol>	<ol style="list-style-type: none"> <li>Partially completed identify training needs for MH/MR/D&amp;A</li> <li>Partially completed.</li> </ol>	<ol style="list-style-type: none"> <li>1. 7/08</li> <li>2. 3/09</li> </ol>
			Staff will be oriented to CCISC model.	<ol style="list-style-type: none"> <li>Re-evaluate orientation material.</li> <li>Incorporate CCISC orientation into general Behavioral Health orientation.</li> <li>Adopt scope of practice for all clinical staff.</li> </ol>	<ol style="list-style-type: none"> <li>Completed.</li> </ol>	<ol style="list-style-type: none"> <li>1. 9/08</li> <li>2. 12/08</li> <li>3. 3/09</li> </ol>

2.	For procedures and service documentation will reflect integration of CCISC philosophy.	System	Program	Review policies and procedures and evaluate opportunities to integrate clinical records and documentation.	<ol style="list-style-type: none"> <li>1. Develop work-group to consider integration of records and documentation.</li> <li>2. Incorporate stages of change into assessment, treatment plan, progress notes and case consults, and discharge summary.</li> <li>3. Pilot use of new forms.</li> <li>4. Evaluate and modify as indicated.</li> <li>5. Submit modified policies and procedures for Agency's and board review.</li> </ol>					<ol style="list-style-type: none"> <li>1. Completed, charts will be under licensed program.</li> <li>2. Partially complete</li> </ol>	<ol style="list-style-type: none"> <li>1. Completed.</li> </ol>						
			Clinical Practice	Collaborate with medical director to develop and implement practice guidelines.	<ol style="list-style-type: none"> <li>1. Discuss and review at physicians meeting.</li> <li>2. Develop written policy to incorporate best practice guidelines.</li> <li>3. Develop written procedure that facilitates welcoming environment for clients with co-occurring disorders.</li> <li>4. Develop scripts for triage/screening and admissions process.</li> </ol>									Clinical Competency			

3.	Obtain management information system data collection on co-occurring disorders.	System	Obtain the ability to identify prevalence of co-occurring disorders	<ol style="list-style-type: none"> <li>1. Identify process to collect, aggregate and analyze prevalence of co-occurring disorders.</li> <li>2. Develop process to establish prevalence upon admission and discharge.</li> <li>3. Coordinate collection of data with HNA's MIS system.</li> </ol>	1. Ongoing at County level.	8/06
		Program	Participate in County PIC	<ol style="list-style-type: none"> <li>1. Refer to PIC work plan</li> </ol>	Ongoing	1. Ongoing
		Clinical Practice	Evaluate outcome measures and establish tools.	<ol style="list-style-type: none"> <li>1. Workgroup to review and establish outcome measures. Choose at least outcome measure and implement.</li> </ol>		3/09
		Clinical Competency	Obtain outcome data for individuals receiving services.	<ol style="list-style-type: none"> <li>1. Evaluate outcome tools to be used including tools currently being utilized.</li> <li>2. Implement new tools.</li> </ol>		<ol style="list-style-type: none"> <li>1. 6/08</li> <li>2. 8/08</li> </ol>