

SB 418 (2015 Legislative Session)

Addictive and Mental Disorders Division Mental Health Investments Reporting <u>Reporting Update for August 2016</u>

<u>Subsection (2)(a): Provide Community-Based Care</u> to support a community-based system of care that is demonstrated through increased utilization of community-based crisis intervention services to reduce short-term admissions to the Montana state hospital.

Program	Budget	Item to Report	Data Collection Component	Timeline	Current Data
County Matching Grants for Crisis Intervention and Jail Diversion Program (2015 Session - HB 33) This program is achieved through contracts with local counties who apply for funding.	Total budget approved for this program was \$2,100,000 in state special and general fund. Including: - \$850,000 existing budget, - \$250,000 new HB 2 - \$1,000,000 new HB 33	Uniform data from counties receiving crisis intervention and diversion grant awards	1. Uniform reporting form filled out from counties and compiled for informational purposes 2. Grant specific information compiled from each county	Quarterly	All requests to the Department were approved. Contracts were awarded to 16 counties, which will benefit 29 counties in total, in amount of \$1,830,639. The Department 16 signed contracts from counties. Fourteen of the counties have billed and received reimbursement in the amount of \$1,515,275. The other two (Powell and Broadwater) counties did not complete the projects. For fiscal year 2016: Beaverhead County ~ Unduplicated persons served 76 and of those, 4 were admitted to MSH, 7 involuntary crisis, 1 acute psychiatric facility, 1 jail/detention, 63 were resolved with law enforcement intervention and referral to community services. Broadwater County ~ No activity. Butte Silver Bow County ~ Butte-Silver Bow had 29 personnel trained in Crisis Intervention Training (CIT) and funded a portion of detention center adult case management in partnership with WMMHC.

Program	Budget	Item to Report	Data Collection Component	Timeline	Current Data
					<u>Custer County</u> ~ Custer County is working in partnership with Dawson County to establish crisis beds at Glendive Medical Center.
					Gallatin County ~ 594 persons were served with 1,579 presentations. Of those, 25 went to MSH, 16 acute psychiatric hospital, 605 went to a voluntary crisis facility, 69 to involuntary crisis facility, 112 went to detention, 665 were discharged to the community.
					Gallatin county provided Crisis Intervention Training (CIT) to 392 individuals from 14 different counties which included county employees, police departments, forest service staff, Montana Highway Patrol, Montana Law enforcement Academy, Probation & Parole Officer, Mental Health Center staff, US Probation, Missoula Urban Indian Health Center, and MSU police.
					Hill County ~ Persons received mental health and addiction services in detention – 131 clients were served for the year and 55 of those clients had a Co-Occurring presentation. Of the 131 persons, 64 were discharged and 67 remain in custody.
					<u>Lake County</u> ~ The Lake House emergency detention program opened on April 5 th . Since opening they have served 38 individuals in the ED beds and 4 individuals in the short-term 14 day diversion program.
					<u>Lewis and Clark County</u> ~ Completed 876 evaluations in the detention center by the Crisis Response Team (CRT).
					<u>Lincoln County</u> ~ Waiting on the results of the feasibility study.

Program	Budget	Item to Report	Data Collection Component	Timeline	Current Data
					Missoula County ~ 3,656 persons served at St. Pats Hospital, Partnership Health, WMMHC, and the detention center, of those 229 went to MSH, 122 acute psychiatric hospital, 281 went to a voluntary crisis facility, 132 to involuntary crisis facility, 92 went to detention, 1,176 were discharged to the community.
					Park County ~ Persons served – 109 (July – March). Total of 48 clients had a Co-Occurring presentation. Of those 109 clients, 27 were referred to community treatment, 2 went to MSH, 2 refused treatment, 8 clients went to jail, and 70 cases were resolved.
					<u>Powell County ~ No activity.</u>
					Ravalli County ~ Persons served – 742. Of those – 409 were resolved, 319 were sent to a voluntary crisis facility or hospital, and 120 went to involuntary ED/MSH.
					Richland County ~ Numbers jail nurse served – 218 and of those 81 had a Co-Occurring presentation and 24 received community outpatient treatment and 12 were sent to a treatment facility.
					<u>Valley County</u> ~ Numbers served in hospital crisis room − 16 Total presentations − 16 and of those 4 of the clients were sent to MSH, 2 went to a community commitment, 1 went to an acute psychiatric facility, and 9 went home.
					<u>Yellowstone County</u> ~ Persons served – 2,437 Total presentations were 10,263 and of those presentations 6,947 were Co-Occurring. The discharge coordinator was hired in January and assisted 348 clients with finding housing, public assistance programs, medical services, employment and life skills.

Program	Budget	Item to Report	Data Collection Component	Timeline			Current Da	ıta	
Community Secure Crisis Beds (2015 Session - HB 34)					1. Total Bed	s Filled.			
This program is achieved through					Month	# Clients	Filled Bed Days	Available Bo Days	ed Usage %
utilization of the following contracts:					July	26	96	248	39%
 Hayes-Morris, Butte 					August	20	83	248	33%
 Hope House, Bozeman 					September	23	102	240	43%
 Journey Home, Helena 					October	21	104	248	42%
 West House, Hamilton 					November	17	113	240	47%
 Lake House, Polson, (Lake 					December	23	91	248	37%
House had hired key employees					January	29	143	248	58%
to staff the emergency	T-4-1 h14 !-				February	21	74	232	32%
detention crisis beds. The	Total budget is				March	19	71	248	29%
emergency detention unit was	\$815,000 general fund each year of the	Number of individuals	1. Number of filled		April	21	90	300	30%
opened up on April 5, 2016.)	biennium.	using secure detention	beds by provider		May	22	107	310	35%
 Note: With the opening of Lake House in Polson more detention 	- \$215,000 existing	beds	2. Disposition of	Quarterly	June	22	96	300	32%
beds became available for the	budget - \$600,000 new		person		Yearly Total	<u>264</u>	<u>1,170</u>	<u>3,110</u>	<u>38%</u>
months of April – June.	HB34				2. Total Dispositions:				
					Month	MSH Placemen	Local Hospital	'wigig	Local Community
					July	11	0	6	9
					August	13	1	3	3
					September	6	1	6	10
					October	7	0	2	12
					November	7	1	4	5
					December	7	0		12
					January	7	2	7	13

Program	Budget	Item to Report	Data Collection Component	Timeline			Current D	ata	
					Month	MSH Placement	Local Hospital	Voluntary Crisis Beds	Local Community
					February	9	2	6	4
					March	5	1	5	8
					April	7	0	12	2
					May	10	0	7	5
					June	7	3	4	8
					Yearly Total	<u>96</u>	<u>11</u>	<u>66</u>	<u>91</u>
Short Term Inpatient Treatment	Total budget is	Number of individuals	1. Number of filled	Quarterly	State genera				
(2015 Session - HB 35)	\$500,000 general fund	using short-term	beds by provider		Location	Days		sposition	
This program is achieved through the	each year of the biennium.	voluntary treatment/final	2. Disposition of persons		Dakota Plac	e Oct - 5c		A Hospital SE	
utilization of the following contracts:	• \$500,000 new HB	disposition of cases	persons		Journey Home	Nov - 9	7191/6	edicaid paid & atment	t home with
Western Montana Mental	35	disposition of cases			Hayes Morr	is Nov – 14		MART progra	m and hama
Health Center					Dakota Plac			ome in Misson	
• St. Peters Hospital in Helena					Dakota Plac			189 Funds and	
(signed June 2016)Billings Clinic in Billings					Hays Morris		4 days PA	ATH & G189 me	
(signed)					Hays Morris	Dec – 10	days Ho	ome with treat	ment
Providence in Missoula					Providence	Dec – 9	days Sh	elter with trea	atment
					Journey	Feb – 5 o		ontana State I	Hospital
					Home		ad	mission	
					Hays Morris			ome with treat	
					Hays Morris			oved voluntar	
					Hays Morris			ome with after	
					Hays Morris			ome with treat	
					Dakota Plac			est House ED ome with treat	
					Hays Morris				
					Hays Morris	Mar – 11	days Ho	ome with treat	ment

Program	Budget	Item to Report	Data Collection Component	Timeline		Currer	nt Data
					Location	Days	Disposition
					Hays Morris	Apr – 13 days	Home with treatment
					Lake House	Apr – 10 days	Home with treatment
					Lake House	May – 10 days	Home with treatment
					Hays Morris	May – 10 days	Home with treatment
					Hays Morris	May – 2 days	Sent to ED bed
					West House	May – 11 days	MSH Admission
					Lake House	June – 5 days	Home with Treatment
					Lake House	June – 7 days	Home with Treatment
							18 Community, 1 VA
					Totals	217 days – 24	Hospital, 2 MSH, 1
					2 00025	clients	Voluntary Crisis Home, 2
							Emergency Detention
						term placements	
					Location	Days	Disposition
					Providence	Feb – 22 days	Home with supported
					Providence	Feb – 13 days	Home with support
					Providence	Feb – 26 days	Stipulated to MSH
					Providence	Mar – 15 days	Home with support
					Providence	Mar- 17 days	Home with support
					Providence	Apr- 2 days	Home with support
					Providence	Feb – 37 days	CB Commit
					Providence	Apr – 20 days	Home with Support
					Providence	May – 22 days	Voluntary Dakota House
					Providence		Home with support
					Providence	May – 18 days	
					Providence	June – 11 days	Home with support
					Providence	June – 24 days	<u> </u>
					Providence		Home with support
					St.Petes		Home with support
					Totals	285 days – 15 clients	10 Community, 3 MSH, 1 Voluntary

Program	Budget	Item to Report	Data Collection Component	Timeline	Current Data
Transitional Mental Health Group Home This program is achieved through enhanced placement payments to eligible group home providers. This is accomplished by providing an enhanced rate of up to \$69.00 per day for approved GBMI placements in group homes.	Total budget is \$1,500,000 general fund each year of the biennium. • \$1,500,000 new HB 2	Number of Guilty But Mentally Ill individuals placed in transitional mental health group homes and subsequent placements	1. Number of GBMI placements 2. Subsequent placement GBMI person 3. Status of RFI for additional transitional group home beds.	Quarterly	1. Six GBMI placements were approved for Kalispell, Missoula and Billings. There were no new placements for the fourth quarter. Vendor

Program	Budget	Item to Report	Data Collection Component	Timeline	Current Data
Housing and Re-entry Services This program has two components: 1. Providing prerelease services and enhanced placement payments for approved GBMI placements. This is accomplished by contracting with Butte Prerelease (CCCS) and Helena Prerelease (Boyd Andrew). 2. Housing support services paid to contractors on behalf of clients.	Total budget is \$300,000 in general fund each year of the biennium. • \$300,000 new HB 2	Number of Guilty But Mentally Ill individuals placed prerelease placement Number of individuals served with housing support	 Number of GBMI placements a. Subsequent placement GBMI person Number receiving housing support services. 	Quarterly	 One GBMI person was placed at Butte Prerelease in July. This person left the prerelease program in July transferring to Wyoming probation. Number of persons receiving housing support services: 115 Individuals Total Received Funding 49 Transitioned out of MSH 48 Funding to prevent readmission 18 Funding to prevent placement at MSH Since 7/1/2015 a total of 115 clients received funding in the amount of \$128,131.40 for housing support allowances. This includes housing, clothing, groceries, hygiene products, and other miscellaneous household needs.
Home and Community Based Services (HCBS) Waiver Expansion This is accomplished through contracting for slots in communities. The locations include: ~ Cascade County – capacity of 39 ~Flathead County – capacity of 34 ~Lewis and Clark County – capacity of 40 ~Missoula County – capacity of 50 ~Silverbow County – capacity of 43 ~Yellowstone County – capacity of 42	Total budget is \$5,780,201 in general, state special, and federal funds\$4,533,189 existing budget -\$1,247,012 new HB 2 budget	Number of people served in new HCBS waiver slots and setting from which individuals were placed in HCBS slots.	 Increased slots Number of HCBS slots utilized Prior HCBS slot placement for increased slots 	Quarterly	 Increased sites: ~Expanded 10 slots in Lewis and Clark County ~Expanded 10 slots in Missoula County ~Expanded 30 slots in Flathead County Number new slots filled: ~10 filled slots in Lewis and Clark County (no change) ~ 10 Filled slots in Missoula County (no change) ~ 14 Filled slots in Flathead County Prior placements for new slots include: ~Lewis and Clark County – 5 living independently, 4 from a nursing home, and 1 from assisting living. (no change) ~Missoula County – 7 living independently, 2 from a nursing home, and 1 was homeless (no change) ~Flathead County – 12 from private setting (alone or with family), 1 from assisted living, and 1 from skilled nursing home.

Program	Budget	Item to Report	Data Collection Component	Timeline	Current Data
72 Hour Crisis Stabilization Journey home opened in July 2015 in Helena (WMMHC). Lake House opened April 2016.	Total budget provided for increasing services \$500,000 in general fund each year of the biennium. • \$500,000 new HB 2 budget	Number of individuals served with additional funding for 72-hour crisis stabilization	1. Services provided by Journey Home in Helena	Quarterly	 From July 1, 2015 to September 30, 2015, an additional 15 clients received services. From October 1, 2015, to December 31, 2015, additional 26 clients received services. From January 1, 2016, to March 31, 2016, an additional 12 clients received services. From April 1, 2016, June 30, 2016, an additional 34 clients received services. (25 Journey Home and 9 Lake House) Total for FY 2016, an additional 87 clients received services. (78 Journey Home and 9 Lake House)
Peer Support Services	Total budget provided for increasing services \$250,000 in general fund each year of the biennium. New HB 2	Number of individuals served with Peer Support Services	1. Number receiving peer support services.	Quarterly	Responses from vendors are due November 17 th , 2015. <u>Update December</u> ~ Two vendors bid on the RFP and Winds of Change was awarded the contract on December 8, 2015. The contract was signed in January and an initial payment of \$30,360 was made for WOC staff training and ancillary office supply start up needs in February 2016. <u>Update March</u> ~ The Winds of Change Peer Recovery Support program in Missoula has a total of seven peer recovery support coaches (PRSC) employed. Four persons have been trained in Whole Health Action Management (WHAM), which is a program designed by peers, to support peers, and teach skills to better manage chronic physical health conditions, mental illness and substance addiction to gain whole health. Peers have assisted individuals with Medicaid enrollment, connecting to Vocational Rehabilitation Services, establishing a Primary Care Physician and connecting to a variety of community resources.

Program	Budget	Item to Report	Data Collection Component	Timeline	Current Data
					 Update June ~ A total of 100 persons participated in the Peer Mentoring program. Of those, 73 were diverted from a jail or MSH placement. A total of 23 were diverted from MSH using crisis housing services. In addition, 29% of the persons had a cooccurring diagnosis. Out of those 100 persons the received the following services connections: 25 vocational rehabilitation 54 established with primary care physician 63 community resources such as food bank, 12-step meetings, public transportation, housing, legal assistance, and clothing
					An additional 1.50 staff were hired creating a total of 8.50 FTE in the community as peer mentors.
Montana State Hospital	N/A	Montana State Hospital admission/discharge data	 Hospital discharges Hospital admissions 	Quarterly	 Discharges: July – September – a total of 162 discharges. October – December – a total of 203 discharges. January – March – a total of 165 discharges. April – June – a total of 208 discharges. FY 2016 total – 738 discharges Hospital admissions: July – September 2015 – a total of 189 admissions. October – December 2015 – a total of 168 admissions. January – March – a total of 208 admissions. April – June – a total of 203 admissions. FY 2016 total – 768 admissions

<u>Subsection (2)(b): Report on Recovery-Focused Services</u> which will provide and reimburse for effective prevention and treatment that enables sustainable recovery in communities, evidenced through quality assurance activities and analyses.

Objective	Item to Report	Data Collection Component	Timeline	Current Data
Evaluate processes and data quality for accuracy and continual process improvement.	DPHHS quality assurance activities and analyses for mental health services Number of Fidelity Reports Completed	 Requested internal audits from QAD Fidelity Results/Reviews Aftercare tracking data for patients at 7-days post discharge Department provider training sessions State sponsored training 	Yearly	 QAD Process: a. Initial discussion with internal auditors and risk liability discussed October 2015. b. Follow-up meetings to discuss process flow – December. c. Received initial process flow information January 2016. d. Next action item – meet and discuss process flow outcome and recommendations. Fidelity Review Reports a. HCBS Waiver Review Team

Objective	Item to Report	Data Collection Component	Timeline	Current Data
				 4. Department provided training: a. 72 hour training – provided to six mental health centers. b. Housing and re-entry services training provided to Center for Mental Health – May 2016 5. Preparing for Perinatal Mood and Anxiety Disorders Training – October 20-21 in Helena.

<u>Subsection (2)(c): Improved Outcomes for Co-Occurring Populations</u> by improving outcomes for individuals with serious mental illness and co-occurring substance use disorders, demonstrated through data collection on individual client outcomes for recovery markers and performance measures.

Objective	Item to Report	Data Collection Component		Timeline	Current Data
Recovery Marker Trends	Recovery marker data for the case management population: housing and employment	Reporting recovery markers. a. Housing b. Employment		1. Recovery Marker Data for FY	1. Recovery Marker Data for FY 2015
		15% 9% 71%	Living IndependentlyOtherLiving w/Care of OtherHomeless/Transient	Yearly	 a. Housing Homeless/Transient – 5% Living in the Care of Others – 15% Living Independently – 71% Other – 9%

Objective	Item to Report	Data Collection Component	Timeline	Current Data
		Employment Disabled Employed No Interest Other Desiring Work		 b. Employment Disabled – 50% Employed – 16% No Interest in Working – 3% Other (Student/Homemaker/Retired/Other) – 15% Unemployed but able/desiring Work – 17%
Adults Serviced in Publically Funded Mental Health Programs	Report service setting information	1. Service setting location of adults receiving publically funded mental health services/programs. Service Setting Community MH State Inpatient Other Inpatient	Yearly	Service Setting Community Mental Health Programs – 93.5% State Psychiatric Hospitals – 2.8% Other Psychiatric Inpatient – 3.7%

Objective	Item to Report	Data Collection Component	Timeline	Current Data
Track and report recidivism and readmission data at MSH.	Montana State Hospital recidivism data	1. Hospital recidivism data a. 30-days b. 90-days c. 1 year	Quarterly	 1. Hospital recidivism data FY 2015: a. 30-days – 48 re-admissions b. 90-days – 27 re-admissions c. 1 year – 82 re-admissions July – September 2015: a. 30-days – 9 re-admissions b. 90-days – 6 re-admissions c. 1 year – 16 re-admissions October – December 2015: a. 30-days – 18 re-admissions b. 90-days – 6 re-admissions c. 1 year – 11 re-admissions January – March 2016: a. 30-days – 13 re-admissions b. 90-days – 10 re-admissions c. 1 year – 26 re-admissions April – June 2016: a. 30-days – 12 re-admissions b. 90-days – 14 re-admissions c. 1 year – 23 re-admissions FY 2016 Total: a. 30-days – 52 re-admissions b. 90-days – 36 re-admissions c. 1 year – 76 re-admissions

<u>Subsection (2)(d): Improved Collaboration</u> between community mental health providers, nursing homes, and state facilities, demonstrated through an increase in state facility discharge rates with a corresponding decrease in client recidivism to state facilities.

Objective	Item to Report	Data Collection Component	Reporting Timeline	Current Data
Discharge coordination between MSH and community mental health centers.	Payments made to community providers to assist with discharge of MSH patients	Tracking of MSH placements utilizing discharge coordination services Payment of discharge coordination services	Quarterly	Contracts for discharge coordination services were finalized October 2015. First Quarter ~ Two mental health centers reviewed 21 patients at MSH. Five patients were accepted into services at community mental health centers. Second Quarter ~ Two mental health centers reviewed 27 patients at MSH. Two patients had pre placement visits and returned to MSH. Ten patients were accepted into services at community mental health centers. Third Quarter ~ Two mental health centers reviewed 34 patients at MSH. Three patients had pre placement visits and two returned to MSH and one discharged to the community. Five patients were accepted into services at community mental health centers. Fourth Quarter ~ Two mental health centers reviewed 8 patients at MSH. 3 patients were accepted into services at community mental health centers. FY 2016 Total ~ 8 visits by mental health centers, with 90 patients reviewed at MSH. 5 patients had pre placement visits and returned to MSH. 23 patients were accepted into services at community mental health centers.
Increase community collaboration and information sharing.	Number of meetings with stakeholders	 Regional Mental Health Centers Meeting One-on-one meetings Stakeholder meetings/events Service Area Authority Community Program Officer – attendance of local advisory council 	Quarterly	 Regional Mental Health Center Meetings: July, August, October, November, January, February, March, April, May, June March – Met with MH Center Representative, AMDD Administrator, MSH Administrator, MH Bureau Chief, and MSH Clinical Director regarding MSH admissions and discharges. One-on-one meetings: 3 Rivers MH Center – September AWARE - October

Objective	Item to Report	Data Collection Component	Reporting Timeline	Current Data
Objective	Item to Report	Data Collection Component	_	WMMHC – October, March (Discuss Crisis Program Funding) C4MH – October, January (Medicaid Expansion) Mental Health Oversight Advisory Committee – July , October, February 3. Stakeholder meetings/events: Board of Visitors Meeting – July, February, March, June Madison County Local Advisory Council – August Admission and Discharge Review Team – 6 meetings since 7/1/2015 Nursing Home Administrators – September Judges meeting - October Case management waiver team - October Lewis and Clark Advisory Committee – November Commission on Sentencing - November Adult Protective Team Meetings – attended 37 since 7/1/2015 Lewis and Clark Mental Health and Law Enforcement – 8 meetings NAMI Conference – October Stakeholder Summit (Dillon) – February Tobacco Cessation Leadership Academy – March Prerelease Directors Meeting – Medicaid Coverage – 6/21/2016 4. Service Area Authority: Eastern SAA - July, August, September, October, November, January, February, March, April, May, June Western SAA - August, September, October, January, February, March, April, May, June Central SAA - September, October, December, February, March, April, May, June All area SAA - July, October, January, April ESAA Congress – May CSAA Congress - April
				5. <u>Community local advisory councils</u> Department staff attended 68 local advisory committee meetings from 7/1/2015 – 10/30/2015 which covers 27 counties in the state

Objective	Item to Report	Data Collection Component	Reporting Timeline	Current Data
				Department staff attended 70 local advisory committee meetings from 11/1/2015 – 12/31/2015 which covers 27 counties in the state
				Department staff attended 45 local advisory committee meetings from $1/1/2016 - 3/31/2016$ which covers 27 counties in the state
				Department staff attended 54 local advisory committee meetings from $4/1/2016 - 6/30/2016$ which covers 36 counties in the state

Addictive and Mental Disorders Division