

St. Clare's Health System

Delivery System Reform Incentive Payment Program

Project Title:
Electronic Self-Assessment
Decision Support Tool (#5)

April 9, 2015



DSRIP Objective

Project Specific:

- Implement an electronic self-assessment decision support tool that clients complete prior to visits with outpatient mental health providers in order to improve mental health consultations and treatment

Hospital Specific:

- Implement an electronic self-assessment decision support tool for use by our low-income clients diagnosed with depression in our outpatient behavioral health services
 - Goal is to reduce number of avoidable outpatient/ED visits, as well as inpatient admission/readmissions
 - Achieving and maintaining high client satisfaction scores is paramount
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Project #5: Electronic Self-Assessment and Decision Support Tool

Vendor: **CommonGround** – Pat Deegan and Associates (PDA)

CommonGround is a web-based application that helps people prepare to meet with psychiatrists or treatment teams and arrive at the best decisions for treatment and recovery.

- Helps prepare clients *before* the appointment, so that *during* the appointment they are ready to work with our doctor to find the best decisions for their treatment and recovery
 - *Before* appointment: CommonGround helps prepare a 1-page Health Report that summarizes clients needs and concerns
 - *During* appointment, the Health Report acts like an amplifier, helping the provider quickly understand the clients goals, concerns and progress
 - Shared decision is printed out as a reminder to the client about what they will do to help themselves before the next appointment
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Project #5: Electronic Self-Assessment and Decision Support Tool

Vendor: **CommonGround** – Pat Deegan and Associates (PDA)

- Goal of using Health Report is to leave the prescriber appointment with a Shared Decision
- The measure of the success with the CommonGround tool is reflected in the Shared Decision statement that meets fidelity

Examples of Shared Decisions and Fidelity Scales:

My prescriber and I agree to work with a combination of antidepressants for smoking cessation and antianxiety effects.

My prescriber and I agree will continue current meds until job change

My prescriber and I agree to keep seeing my PC to regulate my BP.

My prescriber and I agree to keep the meds the same as I am stable. I will continue to see Mim Smith for therapy.

My prescriber and I agree to continue to improve reliability and explore ways of strengthening self-confidence...

My prescriber and I agree that in 2015, I will update my physical exam, be more positive, continue to work with Supported Employment, and to explore the possibility of a dx. of ADHD.

Shared Decisions:

- Is it written in first person / client's voice?
- Is it unique, not formulaic?
- Does the shared decision include an action statement indicating what the person will DO for their recovery between now and the next appointment (i.e., I will walk to manage anxiety; cut down on fatty food to manage weight; keep a mood diary to track mood)
- Is it absent of technical jargon and abbreviations?

Behavioral Health Outpatient Centers

Two locations:

Morris Ave (Denville) and Parsippany

Decision Support Center at each location:

3 computers & cubicles for clients

1 computer for Peer Specialist

Staff at each location:

1.0 FTE Care Manager

1.0 FTE Peer Specialist

Recently approved to hire 1.0 FTE Clinical Specialist, as well as 1.0 FTE Care Manager and 1.0 Peer Specialist

DSRIP Project Update as of March 2015

- Pilot began Sept 2, 2014, ended December 31, 2014
 - Total of 48 clients
- Full project implementation to all eligible clients January 2, 2015
 - Total of 192 clients as of March 31, 2015

Patient Satisfaction Survey

Began collecting data September 2014 with pilot population:

As of December 2014:

- 59 surveys handed out
- 59 surveys returned/completed
- Six questions regarding CommonGround experience
- Scale 1 (Very Poor) to 5 (Excellent) points
- Total of 30 possible points

Average Score of $25.16/30^* = 83.86\%$ satisfaction

*some survey questions left blank

DSRIP Project Implementations

- Educating staff (including clinicians / physicians) on DSRIP project goals and objectives
 - On-site CommonGround visits
 - Monthly DSRIP staff meetings
 - CommonGround National Monthly Webinar
 - Quarterly DSRIP Steering Advisory Committee meeting
- Improving documentation of Stage 3 and Stage 4 measures
 - Providing Stage 3 and 4 measures and inclusion/exclusion criteria to Quality Improvement, IT, Decision Support, Nursing
- Enhancing IT reporting capabilities for BH Outpatient centers
 - Building Powerforms in Cerner to facilitate data tracking and monitoring
 - Future plans: Moving toward EHR – currently paper-based charting

DSRIP Project Achievements

Client Satisfaction Surveys

- 83.86% satisfaction during pilot stage (Sept–Dec 2014)
- updated results will be in DY3 Q4 Progress Report
- Client feedback validates that both the physical and emotional needs of the client are being better met on a more consistent basis

Enthusiastic Staff

- Peer Specialists and Care Managers engage clients in all aspects of their visit
- Motivated and inspired other clinical areas to incorporate similar project measures in their depts (PHQ–9, BMI)
- Major contributor to high patient satisfaction scores
- Recent approval to hire more staff (3.0 FTE)

DSRIP Project Achievements

Contractual Agreement with NJHITEC

- Great overview and feedback of our reporting capabilities
- Numerous recommendations of “what should we do next” regarding data tracking and reporting

Division of Mental Health and Addiction Services visit

- DMHAS Representative visited Morris Ave site March 11
 - Met with staff, overall project implementation overview given
 - They wanted our assistance in rolling out CommonGround in their Peer Support Centers – ongoing communication
 - Spoke with Bergen Regional Medical Center as well
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DSRIP Project Achievements

CommonGround Statistics

	September 2014	October 2014	November 2014	December 2014	January 2015	February 2015
Started	100%	100%	100%	100%	100%	100%
<input type="checkbox"/> Completed	96%	89%	100%	95%	97%	98%
<input type="checkbox"/> w/ Personal Medicine	100%	100%	100%	100%	100%	100%
<input type="checkbox"/> w/ Power Statements	100%	100%	100%	100%	100%	100%
<input type="checkbox"/> w/ Shared Decisions 	100%	87%	84%	81%	88%	88%

National Average for Shared Decisions: 65% → well above National Average!

DSRIP Project Challenges

Medical Staff

- Culture change is not always easy
- “Our communication with our clients was great before – why change?”
- Not all clients use CommonGround (only those with Dx: Depression) → hard to keep track during day

Client refusal

- Not all eligible clients want to use CommonGround
- Not everyone is comfortable using computer/new technology
- Coming in early for appointments to complete Health report

IT/Financial Limitations

- Transition of hospital ownership (CHI → Prime Healthcare)

Community Clinic – Potential Reporting Partner

- Did not agree with Data sharing unless potentially monetary agreement was involved – possible impact to Stage 3 and 4 data figures

What's next for DSRIP?

- Data collection for April 2015 Databook submission ongoing with NJHITEC
- Analyzing cost/benefit of enrolling all low income counseling clients, not just those with Dx: Depression
 - Possible improvement with medical staff buy-in
 - Streamlined front-end process with registration, Decision Support Center, etc.