



New Beginnings Behavioral Health Services, LLC

Performance Quality Improvement

Stakeholder Packet 2016

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Performance Quality Improvement

The purpose of New Beginnings Behavioral Health Services, LLC's (NBBHS) Performance Quality Improvement (PQI) activities are to provide a framework for the continuous organizational-wide approach to achieving effective and efficient service delivery that is reflective of the identified organizational mission, vision, and ethical values, and supportive of the long and short term goals established for the agency.

PHILOSOPHY

New Beginnings Behavioral Health Services, LLC, (NBBHS) its leadership team, and staff, place top priority on a PQI plan and structure to manage all areas of the agency to ensure delivery of the best possible care for NBBHS clients. It is the goal of this policy to provide a mechanism and process designed to identify opportunities to improve client services, outcome measures, community and stakeholder involvement, client satisfaction, personnel satisfaction and retention, and environmental safety and security by measuring, assessing and improving these areas in a systematic and ongoing manner.

A well-defined, implemented, and continuously evaluated PQI plan enables NBBHS to develop short and long term goals that are clear, flexible, responsive, pace setting, and secure.

NBBHS leadership team members and staff are committed to maintaining a high standard of values and personal accountability which are inclusive of all parts of the organization as well as its identified stakeholders. The PQI plan for NBBHS demands evaluation of every program and service against unbiased standards to measure organizational and programmatic innovation, methodology, execution and effectiveness.

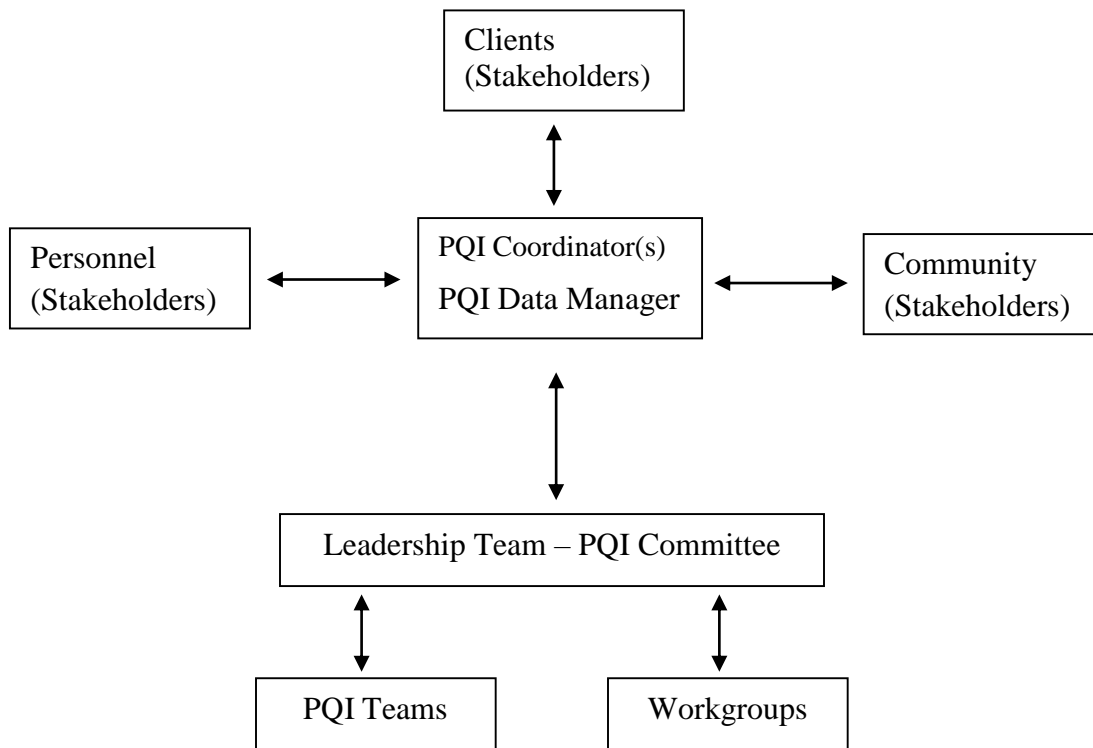
The guiding principles of the agency's PQI approach include:

- A strong focus on client centered care and services
- Utilization of an agency wide approach to improve important functions carried out by this organization by utilizing team efforts, stakeholder involvement and community resources.
- Increasing the probability of desired service outcomes, including client satisfaction, by assessing and improving governance, managerial, clinical and support processes that most effect those outcomes.
- Identifying opportunities to improve client care and services provided.
- Establishing priorities for improving care and services that have the greatest impact on client care outcomes and client satisfaction.
- Alignment of practice with long-term and short-term planning
- A strong emphasis on data collection and the conversion of "data" to review ready information used in the on-going process of continuously modifying practice to meet stakeholder demands



- An organizational culture of on-going learning and capacity development based on findings of PQI activities.
- Coordinated performance improvement activities and integrated efforts of all disciplines/departments throughout the organization.
- Increasing the safety of clients and staff by analyzing processes that pose high risk.

PQI STRUCTURE



The PQI Committee is comprised of senior management from every department/program along with the PQI Coordinator(s). The Leadership Team is responsible to assign, implement, and review activities that guide and improve staff performance from client admission to client discharge. The Leadership Team is also responsible for management of the treatment service and program process. The focus of service reviews shall be to increase positive treatment outcomes. Each member has an equal vote and is required to attend committee meetings unless excused by the CEO.



When a job related or personnel performance concern arises, procedures are in place for contact to be made with an immediate supervisor and/or any member of the Leadership Team.

Members of the Leadership Team include:

- Chief Executive Officer
- Corporate Compliance Officer/ PQI Coordinator
- Clinical Director
- Clinical Advisory Team
- Medical Records Librarian/Utilization Review
- EOC/ Safety Manager
- Billing Specialist
- Community Liaison

The Leadership Team meets weekly to identify and rectify causes in breakdowns resulting in suboptimal care and safety, and to require PQI reports from the systems necessary to facilitate identified improvement efforts.

Comprehensive reviews for analysis of PQI and risk management related data gathered by individual administrative staff within each department/program are completed quarterly. The PQI related data gathered by each department is submitted to the PQI Data Manager to be aggregated as part of the Performance Quality Improvement Report.

This report is reviewed by the Leadership Team for improvement efforts, corrective action, and service change as appropriate.

Performance Improvement Teams and Work Groups

Performance improvement, including performance measurement, is the responsibility of all staff throughout the organization and aides in building organizational capacity for measurement and improvement. When necessary, individuals will be assigned by the PQI committee to performance improvement teams or work groups to carry out performance improvement activities including, but not limited to, collection of data and documentation/review of the necessary policies and procedures for the function assigned.

IMPORTANT PROCESSES AND OUTCOMES

NBBHS will compile data and analyze the following key indicators of performance through the risk management report and performance measures including:

- Evidence Based Practices
- Outcome Assessment Tool
- Risk Management/Safety Report
- Clinical Record Review



- Service Utilization
- Program and Service Review
- Client Satisfaction Surveys
- Employee Satisfaction Surveys

Evidence Based Practices

NBBHS provides evidence based practices by utilizing practices that are closely tied to evidence based studies such as: The Cognitive Behavioral Model, and those standard practices accepted by SAMSHA. The Master Treatment Plan Review/Treatment Plan Reviews (MTPR/TPR's) are used as a measure to evaluate client progress on a minimum of every 90 days. In addition, the agency utilizes an outcomes assessment tool to track case response to treatment.

Outcomes Assessment Tool

NBBHS will utilize the Child and Youth Outcomes Assessment Tool for all clients ages four (4) to eighteen (18). The Adult Outcomes Assessment Tool will be utilized for adult clients. The Outcomes Assessment Tools are utilized at the initial client intake and a minimum of 90 days thereafter for all clients regardless of payer source.

STAKEHOLDER INVOLVEMENT IN THE PQI PROCESS

New Beginnings Behavioral Health Services, LLC has an extensive list of key stakeholders and values their participation in our PQI process. Key stakeholders include personnel, clients, schools/community organizations, the Arkansas Division of Behavioral Health Services, the Division of Medicaid Services, NBBHS Audit and Finance Committee, and the NBBHS Community Advisory Committee.

- Clients participate in quarterly questionnaires which allow them to offer feedback and comments about the quality of service provided.
- The Division of Behavioral Health Services receives an annual agency PQI report, and all required ongoing Certification compliance forms.
- The Division of Medicaid Services receives an annual attestation report, and all required ongoing Provider enrollment documentation.
- Central Arkansas schools, community organizations, and NBBHS Community Advisory Committee, participate in questionnaires on an annual basis which allow them to offer feedback and comments based on their interactions with our organization.
- The NBBHS Audit and Finance Committee also receive monthly financial statements from the Consulting Chief Financial Officer.
- NBBHS staff members participate in semi-annual surveys regarding supervisors, working environment, staff morale, communication, knowledge of agency policy and procedures and evaluation of services. This survey is designed to give each employee an opportunity



to offer comments and suggestions for improvement.

- PQI reports are presented at least quarterly during departmental staff meetings and employees have the opportunity to offer comments and suggestions. Staff members are also given opportunities to serve on departmental PQI teams and workgroups.

The Leadership Team review PQI reports as well as questionnaire results at quarterly meetings in order to identify trends based on factual evidence. Suggestions and recommendations are communicated to the Leadership Team, and PQI Coordinator(s) as well as to the appropriate stakeholders. Corrective action is based on stakeholder feedback and improvement suggestions from departmental leaders and the Leadership Team. Changes in policies, procedures, or staff training are implemented as necessary by the Leadership Team.

For a complete copy of the agency PQI Plan, consumer survey results, and additional agency information, please call the office at: 501.683.1837 / 501.812.3647 or visit the NBBHS website at www.nbbhs.org

Stakeholder feedback is always valued. For this purpose, please offer any questions, suggestions, feedback or concerns at info@nbbhs.org



PQI Stakeholder Review • 2015

Any question, comments, or suggestions can be submitted to New Beginnings Behavioral Health Services by email to info@nbbhs.org or by phone at (501) 812-3647 or (501) 663-1837.

During the course of 2015, New Beginnings Behavioral Health, LLC (NBBHS) as an agency continued to implement significant changes regarding agency direction, staff and process restructuring, and improvement of client care.

As continued and consistent review of the agency as a whole for ongoing improvement opportunities continued, NBBHS experienced positive growth, clinical service improvement and a stabilizing of the agency workforce.

Several key areas of improvement that were addressed in 2015:

- The implementation and appointment of a Clinical Advisory Team (CAT). NBBHS recognized leadership qualities within the professional workforce of the agency and rewarded those efforts with an invitation to share their knowledge and expertise to further improve NBBHS clinical practice.
- NBBHS also recognized strengths and qualities within the agency workforce in 2015 and promoted within for several positions. Both the Medical Records Librarian and Community Liaison positions were filled by NBBHS staff members who had demonstrated significant knowledge and aptitude in their field.
- As the agency continued to see growth and improvement internally it also experienced growth geographically, with service location expansion to several additional schools and establishment of new relationships with additional school districts in the surrounding area, as well as forward movement in securing a second service location in Cleveland County.
- Review and revision of agency processes and procedures for several areas allowed for better service to NBBHS clients and families:
 - The agency Client Orientation Packet was reviewed, revised and consolidated for more current and client friendly utilization.
 - Agency appointment scheduling process for Psychiatric Diagnostic Assessments or Medication Evaluations was reviewed and revised for better communication with clients and families as well as a more welcoming and informational experience.
 - Hiring of a dedicated Mental Health Professional to facilitate consistent service and potential growth of the agency adult client population was completed in 2015.
 - Private Insurance credentialing of qualified staff members is ongoing in order to expand service provision to clients with alternate reimbursement sources.



- Community support and pro-bono services continue to be a priority for NBBHS as an agency and its staff members. Supportive efforts include – Spanish translation services, grief counseling, client advocacy and community support resource information. – **A positive result of these good will efforts:** LRSD has recently agreed to allocate use of facilities to NBBHS for Out of School Time programs allowing for service provision in an appropriate and licensed location.
- NBBHS office relocation and transportation expansion efforts continued throughout 2015, and the agency is nearing completion of this process.
- Re-establishment with area social work schools and counseling programs has allowed for several opportunities of employment for local intern students. Most of these intern students so enjoyed their experience with NBBHS that they have chosen to begin their careers as Mental Health Professionals with the agency.
- Satisfaction survey results and Quality Assurance efforts indicate that the agency is providing essential services to our clients and families resulting in collaborative support efforts within the community and schools.
- Personnel feedback has become more open and honest and sense of responsibility and pride for the direction the agency is taking is evident.

As New Beginnings looks ahead to 2016, agency priority will continue to focus on building a reputation for service excellence, and retention of highly qualified, caring staff members from senior management to support staff.

The intent of all agency efforts and planning is so that all who come into contact with or are affected by New Beginnings will agree that their situation and well-being has improved.

2016 Goals and Objectives

- Supply opportunities for stakeholder feedback and involvement.
- Implement and utilize more appropriate and recognized assessment tool for outcomes measures in client care.
- Review and update as needed all training requirements for current staff and new hires.
- Continue PQI review activities for all agency departments, processes and procedures for improvement indicators.
- Maintain ongoing compliance with all accreditation, licensing and regulatory entities.
- Improve community involvement and relationship building efforts
- Develop working relationship with the UALR School of Social Work
- Complete service expansion efforts into Cleveland County, Arkansas
- Relocate Little Rock offices to a larger, more suitable facility.