

THE GREENE ESC
MENTAL HEALTH SERVICES

PERFORMANCE SUMMARY 2018

The year 2018 was marked by the most comprehensive and transformative overhaul in the Greene County ESC Mental Health Services' history. Two years in the making, the GCESC MHS completed the transformation by the end of the year. Driven primarily by Ohio's Medicaid Behavioral Health Redesign, the GCESC MHS program foundationally modified and enhanced business as well as clinical practices to respond to changes brought on by the Redesign. Just as we began our efforts to meet the new Medicaid requirements, we found that our electronic clinical record (ECR) "Penelope" was grossly inadequate in meeting all the specifications required to interface with the billing systems of Managed Care Companies (MCO's). In February 2018, we started the long and arduous process of implementing a new ECR, "CareLogic". We went "live" with CareLogic September 4th 2018, and we continue to refine the system to best meet our needs. St. Joseph's Orphanage is supporting the ECR implementation through an affiliate agreement. The GCESC as MHS's parent company fully supported MHS with the transformation, including helping to pay for the costs of the new ECR. We kicked off the 2018 Redesign with an all-staff training from a nationally recognized coding expert, Diane Zucker in January. By the July 2018, MHS had secured contracts with all five of the MCO's and the Medicaid "Fee-for-Service" program. In July 2018, we entered into contract with Zirned Clearinghouse, and went "live" in August 2018. By the end of 2018, we achieved success in interfacing with the new billing systems. In 2018, the GCESC also started a new process of billing for mental health services for students on Individualized Education Plans for social, emotional and/or behavioral impairments through the Ohio School Medicaid Program. The GCESC MHS joined the Ohio Children's Alliance to help navigate the complexities of the Redesign. The overhaul required much discussion with school districts, the GCESC Board of Directors, the Mental Health and Recovery Board, staff and other stakeholders over the past year. Client Orientation was updated to include changes regarding funding and fees.

For GCESC Mental Health Services, the past year was filled with many accomplishments and improvements. For 2018, we served more students than ever before at over 674 clients served, and have been able to expand services in high need districts. Over the past 3 years, we have significantly enhanced the referral and staff allocation processes so that we are able meet the needs of the most at-risk and vulnerable students. Annual stakeholder satisfaction surveys indicate that clients, parents/guardians, educators, and school administrators are extremely satisfied with our work, with average satisfaction scores of 90-95%. "Feedback Informed Treatment" outcome tool (F.I.T.), an evidenced-based outcome measure indicates that 84.2% of persons served experienced significant and reliable change from treatment, and overall our clients and their parents experienced above average success from interventions. Persons served report better the average responsiveness to interventions (86%) as indicated on individualized service plans. Similarly, 91% of clients report experiencing progress in counseling sessions as reflected in progress notes. For the 2017-2018 school year, the Learning Center transitioned 20% of students to less restrictive environments.

Exciting new advancements in the GCESC Learning Center, initiated in 2016, were advanced and enhanced in 2018. A Learning Center Improvement Committee, made of

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teachers, therapists and administrators was developed at the beginning of 2015, and explored possible therapeutic improvements to the Learning Center. When the 2015-16 school year started, the Learning Center implemented the “PAX Good Behavior Game”, an evidence-based classroom management tool (on NREPP registry for best-practices), “Zones of Regulation”, an evidence-based self-regulation program, and “Positive Behavior Interventions & Supports” (PBIS), a school-wide prevention framework that is the gold standard for proactively establishing the behavioral supports and school climate necessary for all students to achieve social, emotional, and academic success. In 2018, we expanded PAX into more classrooms, and have created a trauma-informed school culture through professional development, modeling and consultation. In 2018, the LC opened up a new classroom for students with cognitive as well as mental health disabilities. These enhancements have had a positive impact on the students and the staff, including less time out of class, fewer crises, less reliance on restriction, improved student engagement, and better communication between teachers and students.

For 2018, we invested in a number of building/facility improvements and enhancements, including building-wide replacement of fluorescence lights with LED, new paint and rugs, repaired ramps, new locking system, and additional security cameras and intercoms. An additional training room was built for professional development opportunities. Late in 2018, a sensory room was created to serve the sensory needs of students. Under Terry Strieter, the GCESC has invested in structural and environmental enhancements to improve safety, openness, professionalism and positivity.

A SAMHSA “Safe Schools/Healthy Students” grant awarded in 2013 came to an end in 2018, however the momentum to fully develop the prevention programs continued into 2019. SS/HS initiatives that will continue past the grant period include the Early Childhood Mental Health Consultation program, PAX Good Behavior Game, Family Engagement Coordinator and the Core Management Team. The ECMHC program is critical to our vision of designing community services that prevent and reduce future mental health problems through early identification and preschool interventions. We were able to implement PAX Good Behavior Game in seven school buildings in Greene County, across three districts, as well as in the GCLC. We trained 152 teachers in this evidence-based practice. Multiple workgroups and advisory committees were spawned from the SS/HS grant, including Early Childhood Workgroup, Guidance Counselor Advisory Committee, and School-based Referral Workgroup. The grant helped facilitate discussion of important county-wide initiatives across multiple Greene County agencies, including pre-school mental health services, improved parent & family engagement, increased school-based services, suicide prevention, and prevention approaches for substance abuse and school violence.

The above-mentioned highlights were just a few of the performance improvements implemented by GCESC Mental Health Services. The following is a summary of PI activities as they related to GCESC Mental Health Services Strategic Plan goals & objectives:

1. Actively Promote Health, Well-being and Dignity in our Community

- Reduced stigma, advocated for rights of persons served, and increased awareness through regular and frequent trainings for staff, educators and others including Trauma-Informed Care in Schools, Preventing Youth Suicide, Clients Rights

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Training, Crisis Intervention Training (CIT) for police, Understanding the Maltreated Child, The Developing Brain, The Brain Paradigm, Serving the Mental Health Needs of Students, The Mysterious Teenage Brain, School Success & Executive Functioning, Feedback Informed Treatment, Understanding Youth Mental Health for Related Services staff, PAX Good Behavior Game, and Traumatic Event Crisis Intervention Training (TECIP). Tim Callahan and Anya Senetra provide the trainings, and for 2018 the requests for presentations doubled from previous years, providing the GCESC Mental Health Services an opportunity to share our vision with other educators and providers across the state.

- The GCESC Early Childhood Mental Health Consultant Grace Schoessow has been integral in helping educators become more effective at meeting the social, emotional and behavioral needs of students through professional development and consultation. In 2018 she provided 40 trainings at the local, state and national level, all of which have reducing stigma as a primary goal.
- Annual GCESC Mental Health Services training covered cultural competency issues, including LBGQTQ, Transgender & Gender Diversity, and Neurodiversity.
- GCESC Mental Health Services' school-based program was created to increase access to care and is a cornerstone of our mission. In addition to awareness trainings, we have enhanced the website to provide stakeholders information about our services, as well as helpful fact-sheets on a variety of presenting problems.
- Implementation of PAX Good Behavior Game, PBIS, and Zones of Regulation in the Learning Center.

2. Enhance Clinical Effectiveness

- The implementation of the client centered behavioral health outcome measure, "Feedback Informed Treatment" has had an significant impact on enhancing clinical effectiveness. This truly client-centered tool is completely in line with GCESC Mental Health Services core values. For 2018, through our new ECR, we now have additional impact measures to assess treatment outcomes, including the Columbia Suicide Severity Rating Scale (C-SSRS), the Patient Health Questionnaire (PHQ-9A) for teen depression, the Brief Psychiatric rating Scale (BPRS) for psychotic symptoms, ACE Score and Traumatic Events Screening Inventory for trauma.
- GCESC Mental Health Services staff members stay up on the most effective and up-to-date treatments through internal and external trainings, especially treatments designed to help kid's brains work better.
- GCESC Mental Health Services were all trained on the new ICD-10 coding.
- GCESC Mental Health Services staff are trained in trauma-informed approaches.
- A clinical enhancement that has been refined over the past two years is the Transition Plan that allows the person served to begin the transition process at the onset of treatment. In combination with F.I.T., transition planning has furthered our effort to empower persons served to self-manage and self-regulate.
- Trainings mentioned in goal #1 also have had impact on reducing non-academic barriers to school performance.

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- We look forward to doing more to involve families, including finding ways to provide trainings, therapies, and supports. Parent and family engagement is one of the elements of the SS/HS grant, and even though the grant is over, we were able to use the grant to create a Family Engagement Specialist.
- We have enhanced our stakeholder survey process so as to capture feedback essential to our performance improvement efforts.
- For 2018, we are implementing a new ECR, which will improve efficiency, accuracy and effectiveness.

3. *Develop & Maintain Sustainable Business Practices*

- In order to position the GCESC to continue to provide cost-effective school-based mental health services, the MHS program began the long and arduous process of implementing the Medicaid Redesign. As of 2018, we are contracted with all five of the Managed Care Organizations (MCOs), and the Fee-For-Service Medicaid program. We contracted with a clearinghouse in 2018, and have modified billing processes to meet the requirements of the new billing systems. In 2018, we also started the process of helping school districts bill the Ohio School Medicaid Program for students on IEPs for mental health disabilities.
- Productivity has been a key financial indicator for GCESC Mental Health Services, and after several years of QA/PI effort, productivity is consistently on par.
- Late documentation, a spotty but nagging problem for GCESC Mental Health Services has been managed through a number of QA/PI and leadership strategies.
- Although the \$2 million SAMHSA SS/HS grant came to an end in 2018, it has helped our financial position by creating prevention and consultative services, adding services, and increasing access to our services.
- GCESC Mental Health Services through Anya Senetra provides detailed utilization data for The Greene ESC leadership to use in negotiations with school districts, so we can best match allocation with need. The new database will assist in improving how we gather and analyze utilization and allocation data.
- Xenia Community Schools added an additional GCESC Mental Health Services staff member to help address the growing need for mental health services in their school buildings.
- For 2018, GCESC Mental Health Services did not experience any significant losses and met the financial goals for the agency, however the costs involved with meeting the specifications and requirements of the Medicaid Redesign have been expensive, including the cost of a new ECR. The GCESC Board of Directors has expressed support for helping the Mental Health Services program survive the transformation.

#4. Ensure a Healthy & Safe Environment

- 2018 was marked by a commitment to safety, including creating a safety committee for developing and implementing safety related and risk management improvements for all GCESC programs, enhancing the GCESC Safety Plan, training staff and students on the ALICE (Alert, Lock-down, Inform, Counter, Evacuate) approach to active threat, enhanced county-wide Active Threat Protocol, and installing building-wide security cameras/intercoms and a new

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locking system, and implementing PBIS and classroom strategies that increase a sense of safety.

- GCESC Mental Health Services, along with the Learning Center Safety Officer trains and provides unannounced tests of all emergency procedures.
- GCESC Mental Health Services enhanced the new staff member and client orientation processes to more emphasize our health & safety standards.
- Anya Senetra assisted all the Greene County schools in being trained in Traumatic Event Crisis Intervention Planning (TECIP), and as of October 2018, every school building has a TECIP team in place to manage unforeseen crisis.
- GCESC Mental Health Services assisted the Learning Center and other schools in refining Safety Plans and evacuation procedures.
- GCESC Mental Health Services Clinical Records Officer Wendy Wooten also serves as person who completes thorough BCI and FBI background checks.
- QA/PI committee and leadership review major unusual incidents at quarterly to identify trends. The most common incident reported has to do with reporting suspected child abuse/neglect.
- GCESC Mental Health Services staff members all are strictly prohibited by policy from using seclusion, restraints or intrusive interventions. GCESC Mental Health Services is committed to helping educators to use positive approaches and non-violent practices to managing crisis by providing ongoing and frequent trainings, handouts, and consultations.
- The Greene ESC Technology Director has helped make major improvements to ensuring computer security and safety.

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