



FY 16 Adult Community Services Reviews Report (November 2015 – August 2016)

Overview

The Community Services Review (CSR) is a case based review process which affords the Department of Behavioral Health (DBH) a multi-faceted view of service delivery that includes the consumer's perspective. The purpose of these reviews was to better understand the experiences of the adults and their families served within the District of Columbia's behavioral health system. In turn, the reviews allow DBH to examine how consumer experiences may impact the practice performance of core service agencies (CSAs) providing those services.

Methods

Fifty CSR were completed over the course of FY16, divided into three rounds. The criteria used in this set of review was consumers 21 years of age and older who received at least two behavioral health services during 3/1/15 – 12/1/15; the total adult population that met this criterion was 11391. The sample was stratified by age, gender and CSA affiliation. The sample was refreshed 90 days before the second and third rounds, to ensure that randomly selected consumers received recent services at the time of review.

Demographics

Eighty-eight percent of the adults reviewed were African American. Fifty-two percent were male and 48% were female. Half of the adults reviewed were between 50 and 69 years of age. Most (50%) lived in their own homes, while 14% lived with kin/relatives, 14% were homeless, and 22% had other housing arrangements. Sixty-eight percent of the consumers had evidence of trauma, 52% were formerly homeless, 36% had a history of incarceration, and 46% had obtained at least a high school diploma or GED.

Identified Trends in Consumer Status

- For the consumer safety indicators (i.e., *Safety from Harm by Others*, *Behavioral Risk to Self*, and *Behavioral Risk to Others*), the overwhelming majority were safe from harm by others (90%), and were not a behavioral risk to themselves (90%) or to others (98%).
- Sixty-two percent of consumers rated in the acceptable range for *Mental Health Functioning*, 78% rated acceptable for *Substance Use*, and 60% rated acceptable for *Recovery Action*. However, only a little more than half of consumers reported adequate *Social Network Quality* (56%) and *Social Network Recovery Support* (52%).

Trends in Overall Practice

- Fifty-eight percent of the cases reviewed rated in the acceptable range for *Overall Practice Performance*, which was a decrease of 26% from in FY14.
- Five of the 13 practice indicators (*Team Function*, *Team Coordination*, *Transition & Life Adjustments*, *Community Integration*, and *Ongoing Assessments & Adjustments*), less than 50% scored as acceptable.
- There were only two practice indicators (*Cultural Identity* and *Engagement*) that scored above 75% acceptable (82% and 86% respectively).
- *Community Integration*, *Transitions & Life Adjustments*, and teamwork indicators (*Coordination*, *Function*, and *Formation*) all had a decrease of 20 percentage points or more (see Figure 1).
- In FY16, other practice indicators (*Assessment & Understanding*, *Personal Recovery Goals*, *Planning Intervention* total score, *Delivering Intervention* total score, and *Medication Management*) declined by 10 or more percentage points compared to FY14.
- In FY16 three of the *Growing Agencies* (PSI, MBI, & CFS) accounted for 30% of the total CSA population compared to 25% in FY14, an increase of 5 percentage points. In contrast, in FY16 *Shrinking Agencies* (CC, GD, MHSD, & WHC) saw a decrease in their overall CSA population by 5 percentage points compared to FY14 (see figure 2)¹. Shrinking agencies received training from the CSR Unit in order to achieve exit criteria for the *Dixon* lawsuit. Growing agencies, which are newer agencies, did not.
- Eleven of the 14 cases (78%) reviewed at *Shrinking Agencies* scored in the acceptable zone for *Overall Practice Performance* as compared to 4 out of 19 cases (21%) of *Growing Agencies*. For *Growing Agencies* there was a 57% decrease in overall system performance in FY16 when compared to FY14. In contrast, for *Shrinking Agencies*, overall system performance decreased by only 16% when compared to FY14 (see figure 3).

Summary

- In FY16, overall system performance of *Growing Agencies* declined dramatically, thus having a disproportionate impact on system-wide performance.

Shrinking Agencies received technical assistance on practice principles, which led to achieving *Dixon* goals. *Growing Agencies* did not receive technical assistance. DBH plans to provide targeted CSR training and technical assistance to growing agencies to address the overall decline in acceptable performance.

¹ *Growing Agencies* were defined as CSAs that were either new or had at least a 3% or greater increase in their overall consumer population in FY2014 compared to FY2011. *Shrinking Agencies* were defined as CSAs with a 3% or greater decrease in their overall consumer population in FY14 when compared to FY 2011 (see FY2014 Adult CSR report).

- Further exploration of the data will include the identification of the elements of practice that are consistent across well-performing *Shrinking Agencies* and whether they can be replicated across the system.

Table (1) FY16 Overall Consumer Status & Overall Practice Scores

ZONE INDICATOR	OVERALL CONSUMER STATUS	OVERALL PRACTICE
IMPROVEMENT ZONE (SCORES 1 & 2)	8%	14%
REFINEMENT ZONE (SCORES 3 & 4)	60%	70%
MAINTENANCE ZONE (SCORES 5 & 6)	32%	16%
PERCENT ACCEPTABLE (SCORES 4, 5 & 6)	72%	58%

**Figure (1) Community Service Reviews Adult Practice Indicators
(FY2014 vs. FY2016)**

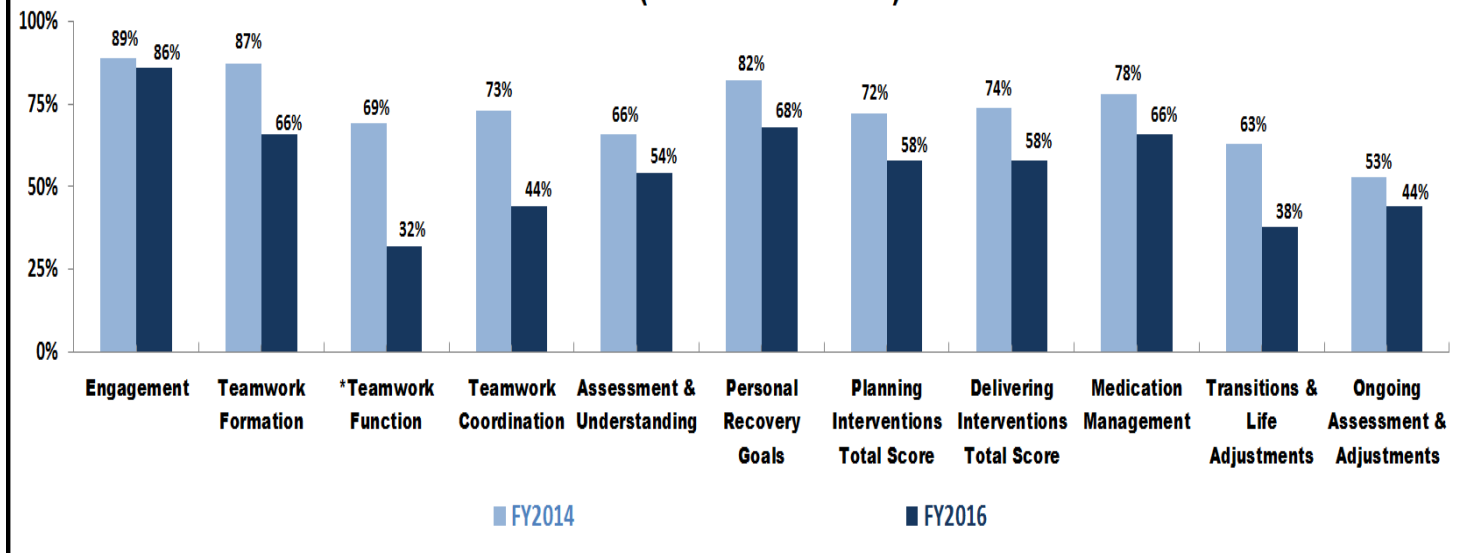


Figure (2) Comparison of Growing CSAs (CARECO, CFS, MBI, & PSI) vs Shrinking CSAs (CC, GD, MHSD, & WHC) percent of Behavioral Health Population for Fiscal Years 2014 & 2016

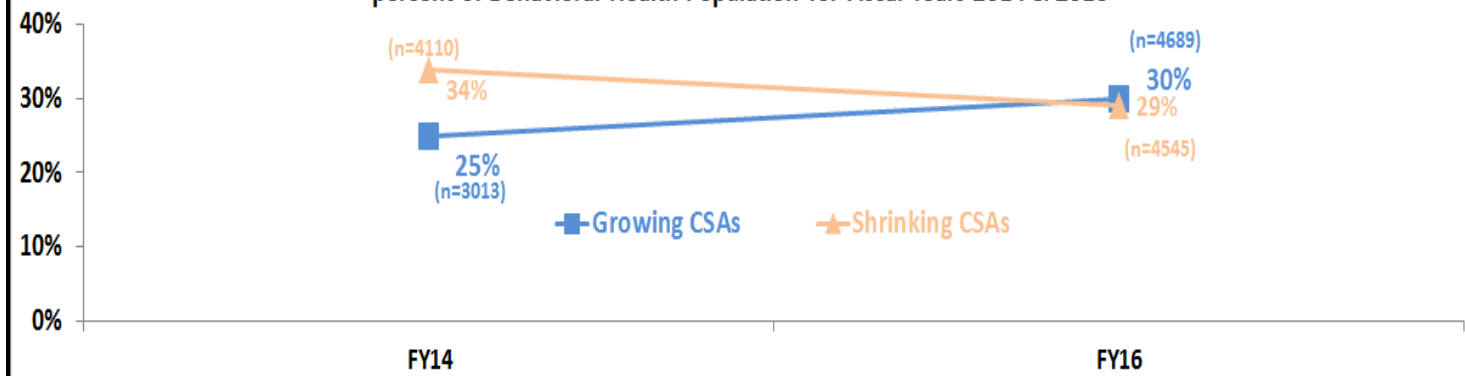


Figure (3) Comparison of Growing CSAs (CARECO, CFS, MBI, & PSI) vs Shrinking CSAs (CC, GD, MHSD, & WHC) for Overall System-wide Performance for Fiscal Years 2014 & 2016

