



3rd and 4th Quarter
Semi-Annual Report
Fiscal Year 2016/2017

Wellplace Michigan
1333 Brewery Park Blvd. Detroit, MI 48207

Wellplace Michigan

Fiscal Year 2016/2017 3rd and 4th Quarter Report

Throughout the course of the year, Wellplace tracks and monitors each aspect of its program as defined in the Quality Assessment Performance Improvement Plan. These programs are monitored for efficiency, effectiveness and satisfaction. The Quality Department is responsible for monitoring and ensuring that all information is properly inputted and kept current throughout the year. Quality data information is presented to the Administrative Team and Quality Committee monthly where different aspects are discussed including aggregate data, trends, analysis of the data, and recommendations for improvement for any area failing to meet established benchmarks, goals or targets. Below is a list of all Wellplace data broken down by Efficiency, Effectiveness and Satisfaction.

EFFICIENCY

Enrollment Proficiency

Wellplace Michigan completes data integrity audits monthly to ensure timeliness and proper documentation. Enrollment turnaround times for MPRI, JAC, and Wraparound programs are tracked for compliance. Per contract, Wellplace must complete a 2 business day processing deadline. The table below shows the data for the 1st and 2nd Quarters, in which an “X” represents 95% compliance for the month.

Month	MPRI	JAC	Wraparound
April	X	X	X
May	X	X	X
June	X	X	X
July	X	X	X
August	X	X	X
September	X	X	X
Compliance Percentage	100.00%	100.00%	100.00%

Enrollment Proficiency Analysis and Recommendations:

The completion time frame must be within 48 business hours from the date of call in order to meet compliance, and once an MCPN is assigned and the process is completed in a timeframe that exceeds 2 business days, that particular call is no longer meeting compliance. In order to meet

compliance for the month, each database must meet a 95% compliance rate, in which 95% of the cases were completed within 48 business hours. All databases have been compliant for each month of the 3rd and 4th quarters. The Staff continues to monitor faxes to ensure that information is received and processed within 2 business days from the date of call. Data integrity audits are completed monthly, as well as each of the databases being reviewed on a monthly basis in order to ensure that each database is meeting compliance within the month.

Data Integrity Audit

Data Integrity Audits are completed monthly by Wellplace Michigan to ensure timeliness, accuracy and proper documentation of data collection. Each Data integrity check reviews an aspect of our Program to ensure we are effectively completing important processes and in the time frames expected. There are 6 different programs/databases that are audited monthly being: MPRI, Wraparound, JAC, MCPN, Program Changes, Access Center and the Denial Database. These programs are audited for several different aspects utilizing individual audit tools specific to each area. The table below shows the data for the 3rd and 4th Quarter of FY16-17. An “X” indicates that a data integrity audit was completed for the month.

Month	MPRI	JAC	Wraparound	MCPN	Program Change	Access Center	Denial
October	X	X	X	X	X	X	X
November	X	X	X	X	X	X	X
December	X	X	X	X	X	X	X
January	X	X	X	X	X	X	X
February	X	X	X	X	X	X	X
March	X	X	X	X	X	X	X
Compliance Percentage	100%	100%	100%	100%	100%	100%	100%

Data Integrity Audit Analysis and Recommendations:

Wellplace, completed data integrity audits for all six programs/databases for every month within April 2017 to September 2017.

Denial Audit

The Denial Audit tool measures several areas of compliance related to the letters sent to consumers informing them of a denial of eligibility for services and the denial process. These

areas include: *Correct beneficiary name on letter; The specific reason for denial included in easily understood language; A reference to the benefit provision, guideline, protocol, or other similar criterion in which the denial decision was based upon is included; A description of the appeal rights including the right to submit written comments, documents, or other information relevant to the appeal is included; An explanation of the appeal process including the right to member representation and the timeframes for deciding appeals is included; A description of the expedited appeal process is included; The decision to deny was completed within 1 business day; Notification of the denial was sent within 1 business day of the decision; Denial Letter was signed and dated by Wellplace Physician with Credentials; and the Physician completed review of Initial Denial Form.* The Denial Audits for the 3rd and 4th Quarter FY16-17 results can be seen in the data table below.

Adequate Action Notice	April	May	June	3rd Quarter Cumulative	July	August	September	4th Quarter Cumulative
Correct beneficiary information on letter	100%	100%	100%	100%	100%	100%	100%	100%
The specific reasons for the denial are included in easily understandable language	100%	100%	100%	100%	100%	100.00%	100%	100%
A reference to the benefit provision, guideline, protocol or other similar criterion on which the denial decision was based on is included	100%	100%	100%	100%	100%	100%	100%	100%
Notification that the beneficiary can obtain a copy of the actual benefit provision, guideline, protocol or other similar criterion in which the denial decision was based upon is included	100%	100%	100%	100%	100%	100%	100%	100%
A description of the appeal rights including the right to submit written comments, documents, or other information relevant to the appeal is included	100%	100%	100%	100%	100%	100%	100%	100%
An explanation of the appeal process including the right to member representation and the timeframes for deciding appeals is included	100%	100%	100%	100%	100%	100%	100%	100%
A description of the expedited appeal process is included	100%	100%	100%	100%	100%	100%	100%	100%
The decision to deny was completed within 1 business day	100%	100%	100%	100%	100%	100%	100%	100%
Notification of the denial was sent within 1 business day of the decision	100%	100%	100%	100%	100%	100.0%	100.0%	100%
Denial letter was signed and dated by Wellplace physician with credentials	100%	100%	100%	100%	100%	100%	100%	100%
Physician completed Review of Initial Denial Form	100%	100%	100%	100%	100%	100%	100%	100%

Denial Audit Analysis and Recommendation:

During 3rd and 4th Quarter FY 16-17 1/3 of denial letters were selected at random for each month totaling fifty-four (54) denial audits completed for the 3rd quarter, while twenty-nine (29) denial audits were completed during the 4th quarter. There were two categories that didn't meet compliance within the first Quarter. All categories of the denial audit met compliance throughout both the 3rd and 4th quarters. This is an improvement from the first two quarters of the fiscal year. These areas will continue to be monitored to ensure compliance.

Appointment Access

It is the policy of Wellplace to schedule intake assessment appointments at appropriate provider locations with consumers that are eligible and enrolled for services and are not currently on the waiting list. It is the policy of Wellplace to uphold integrity in referrals to providers via appointment setting activities, while upholding the consumer choice in providers. Appointments are divided into three categories, urgent, emergent, and routine. *Emergent* appointments refer to a situation in which an individual with a serious mental illness, a developmental disability or a child with a serious emotional disturbance is at risk of harming themselves or others if he/she does not receive care, treatment or support services within 3 hours. *Routine* appointments refer to a situation in which an individual does not present with an urgent or emergent need and is able to ensure safety of self and others while awaiting care, treatment or support services. *Urgent* appointments refer to a situation in which an individual is determined to be at risk of experiencing a mental health crisis or emergency situation in the near future if he or she does not receive care, treatment or support services within 2 days. There are no appointments which are scheduled more than 14 days out from determination of eligibility unless requested by the consumer. The table below indicates the total number of calls to the Access Center and provides the total amount of Urgent, Emergent and Routine appointments made. A consumer only gets an appointment after eligibility has been determined.

MCPN	Total Calls	Total Urgent Appointments	Total Emergent Appointments	Total Routine Appointments
Carelink Network	2870	26	4	2840
Community Living Services (CLS)	53	0	0	53
ConsumerLink Network	240	0	0	240
Integrated Care Alliance (ICA)	63	0	0	63
	3226	26	4	3196

Cumulative 3rd Quarter				
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MCPN	Total Calls	Total Urgent Appointments	Total Emergent Appointments	Total Routine Appointments
Carelink Network	3403	20	3	3380
Community Living Services (CLS)	64	0	0	64
ConsumerLink Network	232	0	1	231
Integrated Care Alliance (ICA)	56	0	0	56
Cumulative 4th Quarter	3755	20	4	3731

Percentage of Appointments Scheduled within 14 Days				
Routine	Carelink	CLS	Consumerlink	ICA
1st Quarter	100.00%	100.00%	100.00%	100.00%
2nd Quarter	100.00%	100.00%	100.00%	100.00%

# of Days Appointments Scheduled within 14 Days				
Routine	Carelink	CLS	Consumerlink	ICA
3rd Quarter	7.70	5.67	6.16	7.00
4th Quarter	7.59	7.78	7.93	7.17

Appointment Access Analysis and Recommendation:

The data for each MCPN is tracked on a monthly basis for both the number of days as well as the percentage that an appointment is scheduled within 14 days. All cases are scheduled within 14 days, with consumers receiving multiple options for available appointments, with appointments that are scheduled outside of 14 days only being scheduled due to consumer request.

Consumerlink had the highest average number of days of appointments scheduled within 14 days at 7.93 in the 4th quarter, while Community Living Services (CLS) had the lowest average number of days at 5.67 within the 1st Quarter. Every MCPN was within compliance within the 1st and 2nd Quarters as all MCPN's were under 14 average number days, as well as meeting compliance for the percentage of appointments scheduled within 14 average number of days. MCPN's will continue to be monitored to ensure that the percentage of appointments as well as the number of days that appointments are scheduled within 14 days meets compliance.

Credentialing Compliance

On a monthly basis, Wellplace will credential and re-credential licensed practitioners who need to complete this process upon hire and every two years thereafter for participation in the DWMHA provider network. Wellplace sends out 30, 45, and 60 day letters to these individuals to remind them of their need to complete and submit the required information in order to assure timely re-credentialing. Wellplace is in continuous communication with these individuals to ensure they are credentialed before their expiration date. Within every month, the credentialing department will receive a number of individuals who will be reviewed. Each individual being reviewed is different in terms of which part of the process they're at, and what they need to be reviewed for. If an individual has not been reviewed previously, and it is their first time for their file to be processed, than they would be identified under the category credentialed. If an individual has previously been credentialed, and it is time for them to be reviewed again, than they would be identified under the category recredentialed. If an individual is verified; Wellplace is contracted by DWMHA to annually complete a 5% audit of the clinical staff of the MCPNs as well as the clinical staff of their contracted providers. This process entails requesting an updated roster from the MCPNs and their contracted providers, then choosing 5% of the clinicians from each provider. Once we receive verification packets from the 5%, Credentialing processes the information in the same manner as the credentialing files, except we do not perform as many queries. Credentialing issues a determination for each clinician to the MCPNs. Below is a list of how many individuals were credentialed, recredentialed, and or verified during the 3rd and 4th Quarter.

<i>Wellplace Michigan</i>				
Credentialing April - June 2017				
Credentialing 3rd Quarter	Total # Credentialed	Total # Re-Credentialed	Total # of Verification	Total
April	13	0	0	13

May	68	38	0	106
June	14	21	0	35
Cumulative 3rd Quarter	95	59	0	154

<i>Wellplace Michigan</i> Credentialing July - September 2017				
Credentialing 4th Quarter	Total # Credentialed	Total # Re- Credentialed	Total # of Verification	Total
July	15	30	0	45
August	81	41	0	122
September	26	9	0	35
Cumulative 4th Quarter	122	80	0	202

Credentialing Compliance Analysis and Recommendations:

Credentialing was completed for 154 individuals within the 1st quarter and 202 individuals within the 2nd quarter. There were 95 files credentialed, 0 verified files, and 59 file that were re-credentialed within the 3rd quarter. There were 122 credentialed files, 80 recredentialed files, and 0 verified files within the 4th quarter. There were a total of 356 individual files handled within the credentialing department through the 3rd and 4th quarter of 2016-2017. All credentialing, re-credentialing, and verifications were processed on time and within compliance.

DWHMA Access Center MCPN Changes & Program Changes

Wellplace processes Program and MCPN change requests. Wellplace reports monthly data to DWMHA including the number of program and MCPN change requests. The quality department also completes monthly data integrity audits to validate the information being reported out to DWMHA. The table below provides a breakdown of MCPN and Program changes per month for 3rd and 4th Quarter FY 16-17.

3rd Quarter	MCPN Change	Compliant	Non- Compliant	Program Change	Compliant	Non- Compliant
April	0	0	0	18	18	0
May	1	1	0	9	9	0

June	0	0	0	17	17	0
Cumulative 3rd Quarter	1	1	0	44	44	0

4th Quarter	MCPN Change	Compliant	Non- Compliant	Program Change	Compliant	Non- Compliant
July	2	2	0	8	8	0
August	1	1	0	17	17	0
September	29	29	0	11	11	0
Cumulative 4th Quarter	32	32	0	36	36	0

MCPN & Program Change Analysis and Recommendations:

During the 3rd quarter, there was 1 MCPN changes with 0 being non-complaint, while there were 44 Program changes with 0 being non-compliant. During the 4th Quarter there were 32 MCPN changes with 0 non-compliant, while there were 36 Program changes with 0 being non-compliant. During the 3rd and 4th quarter MCPN and Program changes FY 16-17, there were 0 changes that were non-compliant out of the 33 total MCPN changes. There were 0 total Program Changes that were non-compliant out of the 80 total Program changes. Wellplace will continue to monitor the MCPN change database along with the Program change database to ensure that all changes are completed within the 2 business day timeframe in order to meet compliance.

Average Call Duration

Wellplace completes a telephone statistics report on a monthly basis. This report includes Wellplace monitoring and tracking of the average call duration for the customer service and clinical units. When a call comes through the Access Center it first goes through the customer service unit, and if deemed eligible than it would proceed to the clinical unit for a clinical screening. Clinicians have a 30 minute benchmark to complete a clinical screening call. The breakdown per quarter is listed below.

Average Call Duration -3rd Quarter	Average Call Duration – Customer Service (Minutes)	Average Call Duration – Clinical Unit (Minutes)
April	4	23.39
May	3.48	24.41
June	3.47	24.1
Average 3rd Quarter	3.65	23.97

Average Call Duration -4th Quarter	Average Call Duration – Customer Service (Minutes)	Average Call Duration – Clinical Unit (Minutes)
July	3.37	23.1
August	3.43	24.26
September	3.3	23.44
Average 4th Quarter	3.37	23.60

Phone Screen Efficiency Analysis and Recommendations:

Wellplace was compliant within the 3rd and 4th Quarter below the 30 minute benchmark, in which Wellplace clinicians completed screenings within the 3rd Quarter at an average of 23.97 minutes, while completing screenings at an average of 23.60 minutes call duration within the 3rd Quarter.

EFFECTIVENESS

Managing for Results-ETS and Enrollment Line

Wellplace completes a Managing for Results-ETS and Enrollment Report monthly. This report includes Wellplace monitoring and tracks service availability, hold times, average time to answer, clinical callbacks processed, busy rate and average abandonment rate. Monthly results and benchmarks are shown below.

3rd Quarter	April	May	June	Cumulative 3rd Quarter FY16-17
Service Accessibility 99% \geq	99.99%	99.99%	99.99%	99.99%
Customer Service Hold Times \leq 120 Seconds	100%	100%	100%	100%
Clinical Screening Hold Times \leq 5% Minutes	100%	100%	100%	100%
Average Time to Answer \leq 30 seconds	6	6	6	6.00
Clinical Callbacks Processed in the Same Day	2029	2448	2069	6546
Busy Rate \leq 1.00%	0%	0%	0%	0%
Call Abandonment Rate \leq 5%	2.40%	2.80%	3.10%	2.77%

4th Quarter	July	August	September	Cumulative 4th Quarter FY16-17
Service Accessibility 99% \geq	99.99%	99.99%	99.99%	99.99%
Customer Service Hold Times \leq 120 Seconds	100%	100%	100%	100%
Clinical Screening Hold Times \leq 5% Minutes	100%	100%	100%	100%
Average Time to Answer \leq 30 seconds	6	7	7	6.67
Clinical Callbacks Processed in the Same Day	2058	3231	3255	8544
Busy Rate \leq 1.00%	0%	0%	0%	0%
Call Abandonment Rate \leq 5%	3.30%	3.80%	4.96%	4.02%

Managing for Results-ETS and Enrollment Line Analysis and Recommendations:

All areas met compliance within the 3rd and 4th quarters. It is worthy of note that the abandonment rate in the 4th quarter was higher than the previous quarter and near the benchmark. Based on review of call volume data for this quarter, it is noted that total call volume for the 4th quarter was the highest of enter year totaling over 5,000 more calls than any other quarter. Thus, it appears that the increased call volume may have led to the increase in abandonment rate. Although, all standards were still met for each month and the quarter as a whole. Wellplace staff continue to monitor and track call volume patterns to ensure appropriate staffing at all time. All categories will continue to be monitored monthly to ensure that they continue to meet compliance.

Translation Line

Wellplace receives calls from consumers on a monthly basis that require translation services. Wellplace also completes a test of the translation line services to ensure excellence in our customer service and response to callers who speak a primary language other than English.

3rd Quarter	Translation Calls	Translation line test calls	Translation test call compliance
April	169	1	100%
May	157	1	100%
June	172	1	100%
3rd Quarter Cumulative	498	3	100%

4th Quarter	Translation Calls	Translation line test calls	Translation test call compliance
July	157	1	100%
August	147	1	100%
September	149	1	100%
4th Quarter Cumulative	453	3	100%

Translation Line Test Data Analysis and Recommendations:

There weren't any reported issues with the translation lines ability to respond or with staff's ability to assist with this working well.

Silent Monitoring Data

Silent monitoring activity occurs on 50 calls per month. These are conducted internally through Wellplace. There are 30 calls from the Customer Service unit which are monitored monthly, 20 calls that are monitored for the Clinical unit, and 20 calls that are monitored for the Substance Use unit. By continually monitoring the call as it transfers departments, the full experience of the caller is able to be monitored more effectively. The monitoring of each Customer Service Specialist, Clinician, and Substance Use Specialist will be evenly distributed, as it is monitored through a monthly tracker. The Quality Manager conducting the monitoring maintains Call

Reports documenting the date of call, time of call, name of staff being monitored, result of monitoring, and corrective action needed. Each call is monitored based on 14 customer service, 25 clinical, (However, an additional category was added in July, so for the months of July – September there are 28 categories which are monitored), and 15 substance use items related to the call process. The cumulative data is presented quarterly to the Quality Improvement Committee for improvement planning. Any call item falling below the internally established performance indicator will receive corrective action.

Customer Service Unit		April	May	June	3rd Quarter Cumulative
Number of Calls Monitored		50	50	50	150
Greeting Monitoring <i>(Each 2 pts. Possible)</i>	Identified the line	100.00%	98.00%	98.00%	98.67%
	Customer Service Specialist identified themselves and title	95.83%	98.98%	98.98%	97.93%
	Notified caller that they may be recorded for quality assurance	97.92%	100.00%	97.96%	98.63%
	Assessed call for crisis situation	97.92%	100.00%	97.96%	98.63%
Review Items <i>(Each 5 pts. Possible)</i>	Quickly identified caller's needs	100.00%	100.00%	96.80%	98.93%
	Treated caller with dignity and respect	99.60%	100.00%	100.00%	99.87%
	Demonstrated a welcoming and customer service oriented attitude	99.20%	100.00%	100.00%	99.73%
	Demonstrated empathy, acceptance and positive regard for individuals regardless of readiness to change	100.00%	100.00%	100.00%	100.00%
	Listened to requests and comments / answered additional questions	99.60%	100.00%	99.59%	99.73%

	Demonstrated program knowledge	99.60%	100.00%	98.78%	99.46%
	Sounded confident and comfortable	100.00%	100.00%	100.00%	100.00%
	Spoke clearly / appropriate pace	100.00%	100.00%	100.00%	100.00%
Closing Monitoring <i>(Each 2 pts. Possible)</i>	Caller was asked to participate in a follow up survey	32.00%	18.00%	12.24%	20.75%
	Caller was linked to the appropriate unit/caller's objective was achieved	100.00%	100.00%	96.00%	98.67%
Customer Service Total		96.87%	96.72%	95.70%	96.43%

Customer Service Unit		July	August	September	4th Quarter Cumulative
Number of Calls Monitored		50	50	50	150
Greeting Monitoring <i>(Each 2 pts. Possible)</i>	Identified the line	100.00%	100.00%	100.00%	100.00%
	Customer Service Specialist identified themselves and title	94.90%	93.88%	96.88%	95.22%
	Notified caller that they may be recorded for quality assurance	100.00%	96.00%	97.96%	97.99%
	Assessed call for crisis situation	95.92%	95.92%	95.83%	95.89%
Review Items <i>(Each 5 pts. Possible)</i>	Quickly identified caller's needs	100.00%	98.80%	98.80%	99.20%
	Treated caller with dignity and respect	100.00%	99.60%	100.00%	99.87%
	Demonstrated a welcoming and customer service oriented attitude	100.00%	99.60%	100.00%	99.87%

	Demonstrated empathy, acceptance and positive regard for individuals regardless of readiness to change	100.00%	100.00%	100.00%	100.00%
	Listened to requests and comments / answered additional questions	99.60%	100.00%	100.00%	99.87%
	Demonstrated program knowledge	99.60%	99.60%	100.00%	99.73%
	Sounded confident and comfortable	99.60%	100.00%	100.00%	99.87%
	Spoke clearly / appropriate pace	99.60%	100.00%	100.00%	99.87%
Closing Monitoring <i>(Each 2 pts. Possible)</i>	Caller was asked to participate in a follow up survey	10.00%	4.08%	3.00%	5.69%
	Caller was linked to the appropriate unit/caller's objective was achieved	100.00%	100.00%	100.00%	100.00%
Customer Service Total		96.00%	95.60%	95.90%	95.83%

Clinical Unit		April	May	June	3rd Quarter Cumulative
Number of Calls Monitored		20	20	20	60
Greeting Monitoring <i>(Each 2 pts. Possible)</i>	Clinician identified themselves and title	97.50%	100.00%	92.50%	96.67%
	Clinician discussed purpose of call and length of screen	97.50%	72.50%	100.00%	90.00%
	Clinician discussed confidentiality and duty to warn	95.00%	92.50%	100.00%	95.83%

Previous Diagnosis (Each 2 pts. Possible)	Clinician states to consumer, "Let's review your information for accuracy First?"	90.00%	100.00%	100.00%	96.67%
	Clinician states to consumer, "Tell me what's going on that makes you think that you have a mental health concern?"	80.00%	55.00%	90.00%	75.00%
	Clinician asks consumer if they have ever been diagnosed with a mental health disorder?	25.00%	53.33%	82.35%	53.56%
Review Items (Each 5 pts. Possible)	Quickly identified caller's needs	100.00%	99.00%	98.00%	99.00%
	Treated caller with dignity and respect	100.00%	100.00%	100.00%	100.00%
	Demonstrated a welcoming and customer service oriented attitude	100.00%	100.00%	100.00%	100.00%
	Demonstrated empathy, acceptance and positive regard for individuals regardless of readiness to change	100.00%	100.00%	100.00%	100.00%
	Listened to requests and comments / answered additional questions	100.00%	98.00%	100.00%	99.33%
	Demonstrated program knowledge	100.00%	99.00%	99.00%	99.33%
	Sounded confident and comfortable	97.00%	98.00%	99.00%	98.00%
	Spoke clearly / appropriate pace	100.00%	97.00%	100.00%	99.00%
Closing Monitoring (Each 2 pts. Possible)	Clinician asked consumer if there is a Provider that they would like to go to for services.	100.00%	100.00%	100.00%	100.00%
	Clinician provided an option for choice of MCPN.	55.56%	60.00%	84.21%	66.59%
	Appointment was set within 14 days.	95.00%	92.31%	100.00%	95.77%
	Clinician encouraged caller to schedule appointment with available providers.	75.00%	85.00%	100.00%	86.67%

Clinician provided caller with information that consumer will need to bring to intake appointment. (ID card, Insurance Card, and list of all medications that consumer is taking for all consumers and parents of consumers to the appointment)	75.00%	90.00%	84.21%	83.07%
Clinician discussed advanced directives.	100.00%	94.12%	82.35%	92.16%
Clinician asks consumer to grab a pen or pencil to write down information regarding appointment.	90.00%	78.95%	85.00%	84.65%
Clinician asks consumer, "Would you prefer a male or female therapist, or is either okay with you?" Clinician will then state to consumer upon receiving answer, "This information will be noted in the appointment information, and I am sure the provider will do the best they can to accommodate your request."	30.00%	90.00%	47.37%	55.79%
Clinician discussed transportation.	100.00%	94.74%	100.00%	98.25%
Clinician informed consumer to contact provider if they must change appointment.	61.11%	84.21%	84.21%	76.51%
Clinician informed consumer, "That you have certain rights that are protected such as confidentiality and the right to be treated with dignity and respect. You also have the right to be fully involved in the planning of your treatment. You will be asked about your hopes and dreams. We call it person-centered planning. In your welcome package you will receive two brochures. One on person-centered planning and one on recipient rights. This information will help you understand what these terms mean. The packet will help to prepare you for full participation of your recovery."	85.00%	75.00%	100.00%	86.67%
Clinical Unit Average	91.68%	89.51%	93.91%	91.70%

Clinical Unit		July	August	September	4th Quarter Cumulative
Number of Calls Monitored		20	20	20	60
	Caller wasn't placed on hold immediately after being transferred by CSS	100.00%	90.00%	100.00%	96.67%
Greeting Monitoring <i>(Each 2 pts. Possible)</i>	Clinician identified themselves and title	97.50%	100.00%	100.00%	99.17%
	Clinician discussed purpose of call and length of screen	100.00%	100.00%	100.00%	100.00%
	Clinician discussed confidentiality and duty to warn	100.00%	97.50%	100.00%	99.17%
Previous Diagnosis <i>(Each 2 pts. Possible)</i>	Clinician states to consumer, "Let's review your information for accuracy First?"	100.00%	95.00%	95.00%	96.67%
	Clinician states to consumer, "Tell me what's going on that makes you think that you have a mental health concern?"	90.00%	94.74%	95.00%	93.25%
	Clinician asks consumer if they have ever been diagnosed with a mental health disorder?	78.95%	82.35%	87.50%	82.93%
Review Items <i>(Each 5 pts. Possible)</i>	Quickly identified caller's needs	100.00%	95.00%	99.00%	98.00%
	Treated caller with dignity and respect	100.00%	95.00%	100.00%	98.33%
	Demonstrated a welcoming and customer service oriented attitude	100.00%	95.00%	100.00%	98.33%
	Demonstrated empathy, acceptance and positive regard for individuals regardless of readiness to change	100.00%	95.00%	100.00%	98.33%
	Listened to requests and comments / answered additional questions	100.00%	100.00%	100.00%	100.00%
	Demonstrated program knowledge	100.00%	93.00%	100.00%	97.67%
	Sounded confident and comfortable	100.00%	99.00%	99.00%	99.33%
	Spoke clearly / appropriate pace	99.00%	97.00%	99.00%	98.33%
Closing Monitoring <i>(Each 2 pts. Possible)</i>	Clinician placed caller on hold while completing assessment, but checked back in every 20 - 30 seconds while completing assessment.	70.00%	75.00%	55.00%	66.67%
	Clinician asked consumer if there is a Provider that they would like to go to for services.	100.00%	100.00%	100.00%	100.00%

Clinician provided an option for choice of MCPN.	61.11%	82.35%	68.42%	70.63%
Clinician explained per script what an MCPN is, "An MCPN is a Managed Care Provider Network which oversees the services that you receive from your provider."and Clinician explained, "If you have any issues with your provider, or if you would like to file a complaint or grievance, you should contact your MCPN."	94.44%	94.12%	100.00%	96.19%
Appointment was set within 14 days.	82.35%	100.00%	87.50%	89.95%
Clinician encouraged caller to schedule appointment with available providers.	62.50%	85.71%	77.78%	75.33%
Clinician provided caller with information that consumer will need to bring to intake appointment. (ID card, Insurance Card, and list of all medications that consumer is taking for all consumers and parents of consumers to the appointment)	77.78%	94.44%	89.47%	87.23%
Clinician discussed advanced directives.	94.74%	93.75%	100.00%	96.16%
Clinician asks consumer to grab a pen or pencil to write down information regarding appointment.	94.74%	94.74%	90.00%	93.16%
Clinician asks consumer, "Would you prefer a male or female therapist, or is either okay with you?" Clinician will then state to consumer upon receiving answer, "This information will be noted in the appointment information, and I am sure the provider will do the best they can to accommodate your request."	78.95%	76.47%	83.33%	79.58%
Clinician discussed transportation.	88.89%	100.00%	89.47%	92.79%
Clinician informed consumer to contact provider if they must change appointment.	88.89%	88.89%	89.47%	89.08%

	Clinician informed consumer, "That you have certain rights that are protected such as confidentiality and the right to be treated with dignity and respect. You also have the right to be fully involved in the planning of your treatment. You will be asked about your hopes and dreams. We call it person-centered planning. In your welcome package you will receive two brochures. One on person-centered planning and one on recipient rights. This information will help you understand what these terms mean. The packet will help to prepare you for full participation of your recovery."	100.00%	94.74%	100.00%	98.25%
Clinical Unit Average		94.65%	94.30%	95.36%	94.77%

SUD Unit		April	May	June	3rd Quarter Cumulative
Number of Calls Monitored		20	20	20	60
Greeting Monitoring <i>(Each 2 pts. Possible)</i>	Substance Use Specialist identified themselves and title	95.00%	100.00%	95.00%	96.67%
	Addressed the timeframe and purpose of the screening	92.50%	92.11%	97.50%	94.04%
	Addressed confidentiality; and duty to warn	90.00%	89.47%	97.50%	92.32%
Review Items <i>(Each 5 pts. Possible)</i>	Quickly identified caller's needs	100.00%	100.00%	100.00%	100.00%
	Treated caller with dignity and respect	100.00%	98.00%	100.00%	99.33%
	Demonstrated a welcoming and customer service oriented attitude	100.00%	98.00%	100.00%	99.33%
	Demonstrated empathy, acceptance, and positive regard for individuals, regardless of readiness to change	100.00%	100.00%	100.00%	100.00%

	Listened to requests and comments/ answered additional questions	100.00%	100.00%	100.00%	100.00%
	Demonstrated program knowledge	100.00%	100.00%	100.00%	100.00%
	Sounded confident and comfortable	100.00%	100.00%	100.00%	100.00%
	Spoke clearly/appropriate pace	100.00%	100.00%	100.00%	100.00%
Closing Monitoring <i>(Each 2 pts. Possible)</i>	Specialist assisted the client with selecting a provider, appt time, and pick up location; if applicable	100.00%	100.00%	100.00%	100.00%
	Specialist set appt and warmed transferred the client over to the provider	50.00%	56.67%	61.11%	55.93%
	Appointment offered within 24-48hrs if pregnant injecting user, pregnant user, injecting user, parent at risk of losing children. All others, Appointment offered in seven calendar days.	100.00%	100.00%	100.00%	100.00%
	You have certain rights that are protected; such as confidentiality, and the right to be treated with dignity and respect. You also have the right to be fully involved in your treatment. In your welcome package; you will receive three brochures explaining recipient rights. This packet will help you understand your rights as a recipient.	47.50%	70.00%	78.95%	65.48%
SUD Total		98.10%	97.62%	98.89%	98.20%

SUD Unit		July	August	September	4th Quarter Cumulative
Number of Calls Monitored		20	20	20	60
Greeting Monitoring <i>(Each 2 pts. Possible)</i>	Substance Use Specialist identified themselves and title	100.00%	95.00%	95.00%	96.67%
	Addressed the timeframe and purpose of the screening	100.00%	95.00%	97.50%	97.50%
	Addressed confidentiality; and duty to warn	100.00%	100.00%	95.00%	98.33%
Review Items <i>(Each 5 pts. Possible)</i>	Quickly identified caller's needs	100.00%	99.00%	100.00%	99.67%
	Treated caller with dignity and respect	100.00%	99.00%	100.00%	99.67%
	Demonstrated a welcoming and customer service oriented attitude	100.00%	100.00%	100.00%	100.00%
	Demonstrated empathy, acceptance, and positive regard for individuals, regardless of readiness to change	100.00%	100.00%	100.00%	100.00%
	Listened to requests and comments/ answered additional questions	99.00%	100.00%	100.00%	99.67%
	Demonstrated program knowledge	100.00%	100.00%	100.00%	100.00%
	Sounded confident and comfortable	100.00%	100.00%	100.00%	100.00%
	Spoke clearly/appropriate pace	100.00%	99.00%	100.00%	99.67%
Closing Monitoring <i>(Each 2 pts. Possible)</i>	Specialist assisted the client with selecting a provider, appt time, and pick up location; if applicable	93.75%	100.00%	100.00%	97.92%
	Specialist set appt and warmed transferred the client over to the provider	50.00%	66.67%	50.00%	55.56%

Appointment offered within 24-48hrs if pregnant injecting user, pregnant user, injecting user, parent at risk of losing children. All others, Appointment offered in seven calendar days.	100.00%	91.67%	93.33%	95.00%
You have certain rights that are protected; such as confidentiality, and the right to be treated with dignity and respect. You also have the right to be fully involved in your treatment. In your welcome package; you will receive three brochures explaining recipient rights. This packet will help you understand your rights as a recipient.	68.42%	70.59%	70.00%	69.67%
SUD Total	98.19%	98.20%	98.11%	98.17%

Silent Monitoring Analysis:

During silent monitoring the Customer Service unit has an area for improvement for the 3rd and 4th quarters in the following area; “Caller was asked to participate in a follow up survey”. The Customer Service Unit scored a cumulative score of 20.65% during the 1st Quarter, while scoring a cumulative score of 5.69% during the 2nd Quarter. This will be discussed within supervision sessions with the customer service specialists in order to ensure that this area improves, as well as being discussed within team meetings. It should be noted that this is a consistent area of low performance for the customer service department and it continues to be addressed. The Customer Service Unit was compliant in every other category and compliant overall for every month within the 3rd and 4th Quarter.

Wellplace Clinician unit didn’t meet compliance during the 3rd Quarter for the following areas; “Clinician discussed purpose of call and length of screen”, in which they scored a cumulative score of 90%, “Clinician states to consumer, "Tell me what's going on that makes you think that you have a mental health concern?", in which they scored a cumulative score of 75%, “Clinician asks consumer if they have ever been diagnosed with a mental health disorder?” in which they scored a cumulative score of 53.56%, “Clinician provided an option for choice of MCPN.” in which they scored a cumulative score of 66.59%, “Clinician encouraged caller to schedule appointment with available providers.” in which they scored a cumulative score of 86.67%, “Clinician provided caller with information that consumer will need to bring to intake

appointment. (ID card, Insurance Card, and list of all medications that consumer is taking for all consumers and parents of consumers to the appointment)” in which they scored a cumulative score of 83.07%, “Clinician discussed advanced directives.” in which they scored a cumulative score of 92.16%, “Clinician asks consumer to grab a pen or pencil to write down information regarding appointment.” in which they scored a cumulative score of 84.65%, “Clinician asks consumer if they prefer a male or female therapist” in which they scored a cumulative score of 55.79% ;“Clinician informed consumer to contact provider if they must change appointment.” in which they scored a cumulative score of 76.51% and “Clinician informed consumer regarding rights and person centered planning” in which they scored a cumulative score of 86.67%, within the 3rd Quarter.

Wellplace Clinician unit didn’t meet compliance during the 4th Quarter for the following areas; “Clinician states to consumer, "Tell me what's going on that makes you think that you have a mental health concern?", in which they scored a cumulative score of 93.25%, “Clinician asks consumer if they have ever been diagnosed with a mental health disorder?” in which they scored a cumulative score of 82.93%, “Clinician placed consumer on hold but checked back every 20-30 seconds” in which they scored a cumulative score of 66.67%; “Appointment was set within 14 days” in which they scored a cumulative score of 89.95%, “Clinician provided an option for choice of MCPN.” in which they scored a cumulative score of 70.63%, “Clinician encouraged caller to schedule appointment with available providers.” in which they scored a cumulative score of 75.33%, “Clinician provided caller with information that consumer will need to bring to intake appointment. (ID card, Insurance Card, and list of all medications that consumer is taking for all consumers and parents of consumers to the appointment)” in which they scored a cumulative score of 87.23%, “Clinician asks consumer to grab a pen or pencil to write down information regarding appointment.” in which they scored a cumulative score of 93.16%. “Clinician discussed transportation.” in which they scored a cumulative score of 92.79%, “Clinician asks consumer if they prefer a male or female therapist” in which they scored a cumulative score of 79.58%, and “Clinician informed consumer to contact provider if they must change appointment.” in which they scored a cumulative score of 89.08%, within the 4th Quarter.

The Clinical Silent Monitoring tool added 3 new categories in the 3rd and 4th quarters and an additional 8 new categories in the previous 2 quarters of this year. The 8 new categories from the first half of the year are showing significant improvement in the last 2 quarters of the year. The additional 3 categories were added in the 4th quarter and 2 of the 3 new categories met compliance in the first quarter. The remaining category is showing improvement.

Wellplace Substance Use unit didn’t meet compliance during the 3rd Quarter for the following areas; “Addressed the timeframe and purpose of the screening” in which they scored a cumulative score of 94.04%, “Addressed confidentiality; and duty to warn” in which they scored a cumulative score of 92.32%, “Specialist set appointment and warmed transferred the client over to the provider” in which they scored a cumulative score of 55.93%, and “Explanation of recipient rights” in which they scored a cumulative score of 65.48% . Wellplace Substance Use unit didn’t meet compliance during the 4th Quarter for the following areas; “Substance Use

“Specialist set appointment and warmed transferred the client over to the provider” in which they scored a cumulative score of 55.56%, and “Explanation of recipient rights” in which they scored a cumulative score of 69.67%. These non-compliant areas will be discussed within coaching sessions with the substance use unit as well as team meetings in order to ensure that these areas continue to improve in order to meet compliance. The substance use unit met compliance within every month for the 3rd and 4th Quarter.

DWHMA Access Center Peer Reviews

In order to ensure quality services are provided, Wellplace conducts peer reviews for the DWHMA Access Center Customer Service, Clinical, and Substance Use Units. Peer Review is an internal quality evaluation measurement utilized to ensure adherence to call center documentation and clinical standards. All staff is monitored through the peer review process. Each case is given a percentage rating based on quality review items. Any item receiving a score of 79% or below will receive corrective response. The breakdowns of the Peer Review scores are displayed in the charts below.

Customer Service Peer Review		
Month	# of Peer Reviews	Percentage
April	30	96.48%
May	23	98.45%
June	48	93.51%
3rd Q Cumulative	101	96.15%
July	45	91.35%
August	49	92.82%
September	39	95.37%
4th Q Cumulative	133	93.18%

Clinical Peer Review		
Month	# of Peer Reviews	Percentage
April	61	93.94%
May	60	91.48%
June	58	93.03%
3rd Q Cumulative	178	92.82%
July	64	92.13%
August	64	93.03%
September	64	92.29%

4th Q Cumulative	192	92.48%
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Substance Use Peer Review		
Month	# of Peer Reviews	Percentage
April	33	95.88%
May	34	95.29%
June	14	95.05%
3rd Q Cumulative	81	95.40%
July	8	90.17%
August	6	92.31%
September	6	95.26%
4th Q Cumulative	20	92.58%

DWMHA Access Center Peer Review Analysis:

The Customer Service unit scored a cumulative average score of 96.15% for the 3rd Quarter, and 93.18% for the 4th Quarter. The Clinical unit scored a cumulative average of 92.82% for the 3rd Quarter and 92.48% for the 3rd Quarter. The Substance Use unit scored a cumulative average score of 95.40% for the 2nd Quarter, and 92.58% for the 4th Quarter.

SATISFACTION

DWHMA Access Center Satisfaction Surveys

The satisfaction survey process was established during 2011 to capture the satisfaction levels of the services provided in the Access Center. Calls that come into the Access Center are asked to participate in a satisfaction survey (with the exception of crisis call as this would not be clinically appropriate). Providers and Consumers are administered separate surveys consisting of similar questions. The Provider Satisfaction survey is compiled of 8-10 questions, while the Consumer Satisfaction survey is compiled of 28 questions, which address: Quality of Care, Access and Attitude/Service. All items are rated on a scale of 1 (poor) to 5 (excellent) or N/A. A report of the data is distributed on a quarterly basis. Whenever someone contacts the access center they are asked if they would like to take a survey in reference to the level of services they received that day. If agreed to, an individual from the Wellplace administration team than contacts the client and administers the survey. Wellplace administration attempts to call a client back on three different occasions to collect survey data.

Consumer Satisfaction Survey	Percentage
1st Quarter	95.69%
2nd Quarter	92.81%
3rd Quarter	95.85%
4th Quarter	92.67%
Average Score FY 16-17	94.12%

Provider Satisfaction Survey	Percentage
1st Quarter	96.67%
2nd Quarter	97.92%
3rd Quarter	N/A
4th Quarter	99.46%
Average Score FY 16-17	98.22%

Satisfaction Surveys Analysis

There were a total of 48 provider surveys conducted during the fiscal year. Although there were none conducted in the 3rd quarter, there was an increase in scores in the 4th quarter to 99.465, with an overall percentage for the year of 98.22%. The Consumer satisfaction surveys had a total number of 947 surveys for the fiscal year. The percentage fluctuated in the last 2 quarters of the year, similar to the first 2 quarters of the year, which the first and third quarters being the highest and over 95% and the 2nd and 4th quarters both showing decreases at just under 93%. Overall, the satisfaction rates are positive, however this will continue to be monitored in order to ensure the rates continue to show improvement. The overall consumer satisfaction rate is 94.12% which is under the required 95%, but still demonstrates positive satisfaction. Efforts will be made in the coming months to encourage increased rates of consumer satisfaction.

Service Accessibility

Wellplace monitors and tracks staff requests for accommodation, Consumer Face-to-Face encounters, and if consumers were provided MCPN options upon enrollment on a monthly basis. We track this information to ensure that we are providing every client with the same service across the board.

3rd Quarter	April	May	June	3rd Quarter FY16-17 Cumulative
Staff requests for accommodation	0	0	0	0
Consumer Face-to-Face encounters	0	0	0	0
Clinician provided consumer with MCPN options 100% ≥	100%	100%	100%	100%

4th	July	August	September	4th Quarter FY16-17 Cumulative
Staff requests for accommodation	0	0	0	0
Consumer Face-to-Face encounters	1	0	0	1
Clinician provided consumer with MCPN options 100% ≥	100%	100%	100%	100%

Accessibility Analysis and Recommendations:

Clinician provided MCPN options during every interaction with every consumer. There were zero (0) staff request for accommodation within the 2nd and 3rd Quarters. There was only (2) face-to-face encounters requested within the 4th Quarter, with zero (0) face to face encounter requested within the 3rd Quarter.

Follow-Up Calls

Wellplace tracks and monitors the number of consumers who are denied eligibility following a screening with a clinician. Consumers who are denied eligibility are asked if they would like to participate in a follow-up contact via phone or letter regarding the referrals and resources that

they were provided. Clinicians must make 3 attempts to reach consumers who have requested a follow-up contact by phone before sending a follow up letter. If reached, consumers are asked about their success in reaching and utilizing the referrals given to them at the time of their denial of eligibility. If a consumer agrees to a follow up call, but contact is not successful, than it becomes an unsuccessful referral. The chart shown below provides the results for the total amount of follow ups requested and the success of the referrals provided.

3rd Quarter Referral Follow up						
Months	Number of Denials	Agreed to Follow Up Call	Successful Referrals	Unsuccessful Referrals	% of Successful Referrals	Referral Letters Sent
April	38	16	9	7	56.25%	7
May	53	33	15	18	45.45%	18
June	45	34	20	14	58.82%	14
3rd Quarter Cumulative	136	83	44	39	53.51%	39

4th Quarter Referral Follow up						
Months	Number of Denials	Agreed to Follow Up Call	Successful Referrals	Unsuccessful Referrals	% of Successful Referrals	Referral Letters Sent
July	39	27	10	17	37.04%	17
August	31	18	11	7	61.11%	7
September	26	14	6	8	42.86%	8
4th Quarter Cumulative	96	59	27	32	47.00%	32

Accessibility Analysis and Recommendations

There were 136 denials within the 3rd Quarter with 61.03% agreeing to a follow up call at 83, while in the 4th Quarter there were 96 denials with 59 agreeing to a follow up call, which was 61.46%. During the 3rd Quarter there were 53% successful referrals, while in the 4th Quarter there was a decrease to 47% referrals that were successful. There were 39 unsuccessful referrals within the 3rd Quarter in which all 39 individuals received a referral letter. In the 4th Quarter there were 32 unsuccessful referrals in which 32 referral letters were sent. The monthly data will continue to be monitored to ensure that any unsuccessful referral receives a referral letter.