Preface to Guide for Behavioral Health Service Provision Tool (BHSPT)

Definitions:

- Acronyms
    - ADHS/DBHS – Arizona Department of Health Services/ Division of Behavioral Health Services
    - BHP – Behavioral Health Professional
    - BHR – Behavioral Health Recipient
    - BHSPT – Behavioral Health Service Provision Tool
    - BQMO – Bureau of Quality Management Operations
    - EOC – Episode of Care
    - OPI – Office of Performance Improvement
    - T/RBHA – Tribal/Regional Behavioral Health Authority
- Review – Validation exercise between DBHS and its contracted T/RBHAs.
- BHP - An individual who meets the applicable requirements in A.A.C. R9-20-204 and is a:
  a. Psychiatrist
  b. Behavioral Health Medical Practitioner
  c. Psychologist
  d. Social worker
  e. Counselor
  f. Marriage and family therapist
  g. Substance abuse counselor, or
  h. Registered nurse with at least one year of full-time behavioral health work experience and
  i. Meets the requirements of A.A.C. Title 9, Chapter 20
- Current Assessment
    - An assessment completed within 12 months prior to the end date of the review period
    - Signed by a BHP within 30 days.
        - The date of completed assessment will be based on BHT/assessors signature with a 30 day grace period for BHP signature. If BHP signature is not dated, or not dated within 30 days of assessment, it will be scored as not current.
- Current Treatment Plan
    - A treatment plan completed within 12 months prior to the end date of the review period
    - Signed and dated by the BHR/guardian and one staff member. If the BHR/guardian is available only by phone, or is physically unable to sign the document, ADHS/DBHS requires two separate witnesses hear and document confirmation of the BHR's agreement with the document.
    - A current assessment was completed prior to or the same day as the treatment plan (any assessment created after the treatment plan does not allow the

treatment plan to be based on the assessment and therefore, the treatment plan would not be considered current).

Description:

The BHSPT is used to measure compliance with performance improvement specifications. It determines whether behavioral health recipients' assessments are current and complete with service plans that incorporate the needs and service recommendations identified in their assessments. It is also used to determine whether behavioral health recipients receive the services that were recommended in their service plans.

Documentation is submitted by the T/RBHAs electronically via the Sherman server. All records are in PDF format and contain information for only one recipient. For RBHAs, the review is completed on a quarterly basis by BQMO OPI staff. T/RBHAs are reviewed semi-annually.

The review period is identified prior to each review (quarterly or semi-annually) and is based on quarterly data. The end date of the review period determines the timeline for current documents (see dated chart below). All documents submitted and completed within 12 months prior to the end date of the review period are considered during the review. All dates are based on the State Fiscal Year.

Review Quarter		Review Period Dates for current documents
Q1	July 1 – September 30, 2010	October 1, 2009 – September 30, 2010
Q2	October 1 – December 31, 2010	January 1, 2010 – December 31, 2010
Q3	January 1 – March 31, 2011	April 1, 2010 – March 31, 2011
Q4	April 1 – June 30, 2011	July 1, 2010 – June 30, 2011

The BHSPT is scored in an Access database using both quantitative and qualitative information. In the Access database, all questions contain the options of Yes, No or NA (see question portion of guide). They also contain a drop down menu numbered with 0-3. This is a modified Likert scale to score the quality of the documentation submitted. An example would be, "Was the legal history documented on the assessment?" number 14 on the assessment. One would score 'Yes' if an assessment was current (completed within the 12 months prior to the end date of the review period and is signed by a BHP within 30 days) and reported the BHR was arrested in the last year. However, if no dates, details or charges were documented, the quality would be poor and qualitatively scored a 1. The qualitative scale scoring is as follows:

N/A	If this section was not scored or did not apply to BHRs current documents
0	No, this element was not present AND was scored a No on the quantitative scale
1	Lacks content and substance related to the designated elements in Provider Manual, Performance Improvement Specifications Manual, and other referenced material/required elements.

2	Meets the designated elements in Provider Manual, Performance Improvement Specifications Manual, and other referenced material/required elements.
3	Exceeds the designated elements in Provider Manual, Performance Improvement Specifications Manual, and other referenced material/required elements.

The qualitative scale does not use scores of N/A to count against the overall qualitative scoring. Only 0-3 are utilized to report on qualitative results.

**** All submitted records with a current treatment plan and assessment must be scored for both a treatment plan and an assessment. Records submitted that do not contain a current treatment plan or assessment will be entered into the database, however, scoring will only be completed for current status of assessment and treatment plan. Only demographic information will be completed.***

Assessment:
The assessment is scored if the recipient has an open EOC. If the recipient fits the above criteria, but no assessment was submitted, it was not signed by a BHP within 30 days, was not dated, or was not current, all questions in this section are scored NO. If the recipient does not have an open EOC, this section is scored NA.

Treatment Plan:
The treatment plan is scored if the recipient has an open EOC. If the recipient fits the above criteria, but no treatment plan was submitted, it was not signed by the recipient/guardian AND one staff member, or it was not dated, all questions in this section are scored NO. The date of the treatment plan is based on the date of consumer signature. If the recipient has had an open EOC for less than 90 days, this section is scored NA. If the BHR/guardian must agree to the treatment plan by phone, 2 members of the clinical team must verify agreement through direct contact with the BHR/guardian and document this on the treatment plan.

Methodology:

Methodology is determined by the BQMO Specifications Manual (http://www.azdhs.gov/bhs/qm/BQMO-Specifications-Manual_2009-2010.pdf) specifically Behavioral Health Service Provision and Behavioral Health Service Plan.

Inter-rater Reliability:

One record is reviewed per RBHA, per quarter, by all reviewers. One reviewer enters in all identifying information and scores the record in the BHSPT Database. The remaining reviewers enter the same record under a pseudonym and score it in the BHSPT Database. Scores are compared to meet 80% accuracy. Discrepancies greater than 20% are addressed with reviewers as appropriate.

Electronic Record Submission Format:

- All submissions must be in PDF format
- All documents relating to each Behavioral Health Recipient (BHR) must be submitted in one PDF document (e.g. all of 'Mary Smith's' documents need to be combined in one document). No more than one BHR's documents may be in one PDF document.
- Each document must be labeled with the Behavioral Health Recipient's name (which must match the name as listed on the DBHS spreadsheet)
- Each section of each document must be identified by topic (e.g. Assessments, Treatment Plans)
- All pages submitted must be legible and complete (crooked pages causing missing information or signatures will not be given credit; acronyms unique to the provider or T/RBHA must be spelled out)
- All scanned pages must be rotated in the same direction
- All documents must be placed in folders labeled by population (e.g. T19 Children, Adults) and GSA (for applicable RBHA's only)
- All files must be zipped prior to placement on the Sherman server
- All submissions must be placed into the RBHA specific folder on the Sherman server
- Once submissions are complete, the RBHA must send email notification to OPI staff, OPI Manager and BHS Compliance mailbox.

Required Quarterly Review Documents:

- The most recent assessment (even if it is not current)
- If the BHR opened an EOC in the last 12 months and a core assessment is being submitted, the interim treatment plan must be submitted as well. If the interim treatment plan was not completed and a full treatment plan was completed the same day as the core assessment, this treatment plan must be submitted as well as the most current treatment plan.
- The most recent treatment plan (even if it is not current)
- The DBHS sample spreadsheet must be returned with dates indicating previous treatment plan and previous assessment (those treatment plans and assessments completed prior to the documents submitted).

Guide Reference Points:

Demographic Data Set User Guide (DUG)
http://www.azdhs.gov/bhs/provider/DUG_5.0.pdf

Provider Manual Sec 3.9 Intake, Assessment and Service Planning
http://www.azdhs.gov/bhs/provider/sec3_9.pdf

Notice of Action Requirement
http://www.azdhs.gov/bhs/provider/sec5_1.pdf.

Covered Behavioral Health Services Guide

http://www.azdhs.gov/bhs/FNLguide_v6.9.pdf

DBHS Practice Protocol, Child and Family Team Practice
http://www.azdhs.gov/bhs/guidance/cft.pdf

Provider Manual Sec 3.12 Advance Directives
http://www.azdhs.gov/bhs/provider/sec3_12.pdf

Cultural Competency definition
http://www.azdhs.gov/bhs/provider/defs/ccomp.pdf

BQMO Specs Manual on DBHS website
http://www.azdhs.gov/bhs/qm/BQMO-Specifications-Manual_2009-2010.pdf

Arizona Administrative Code
http://www.azsos.gov/public_services/Table_of_Contents.htm