

# Department of Health and Human Services

## Assertive Community Treatment (ACT) Self-Fidelity Response

<b>CMHC:</b>	<b>Seacoast</b>
<b>DHHS Response Date:</b>	<b>12/1/16 2<sup>nd</sup> Response 1/26/17</b>

### Executive Summary:

Seacoast Mental Health Center (SMHC) hired an outside expert, Mr. David Lynde, to conduct a Fidelity review of their ACT team service. Thank you for providing this ACT Fidelity Report and for your ongoing efforts to provide high quality services to consumers with psychiatric disabilities.

The center provided Mr. Lynde's report to DHHS without a plan for quality improvement or specific targets for improvement under fidelity items with low ratings. The center will need to provide their fidelity assessment with specific plans for improvement that include specific targets and expected dates of completion. Also, please note that the ratings for one item did not seem to match the fidelity scoring guide and may need to be updated as well.

Please include action items selected by your team, and Areas of Focus for improvement selected by your team. We are looking for specific and measurable goals with specific timelines. We would also like to see your center's priorities for improvement in the coming year. Seacoast does not have to have to propose to improve all areas with low scores. Rather, we would like to see a realistic plan for activities the center intends to implement to improve quality of the ACT service in the coming year.

We commend you for hiring a consultant who has provided an impartial assessment of your ACT service. We are delighted that your team is organized in alignment with the ACT model. We are also delighted that you have a peer on your team. Please ensure that he or she can maintain a peer support role, and encourage him/her to attend the peer specialist support group sponsored by the Office of Consumer and Family Affairs.

Please submit an updated Fidelity Review to Michele Harlan at BMHS by December 16, 2016.

We appreciate the updated Fidelity Review with comments and improvement plans of 12/16/2016. Upon review we have determined that Seacoast is reasonably in compliance with the purpose and intent of the ACT self-fidelity process. We have updated the DHHS response herein accordingly.

SMHC has identified several important areas of activity, including a creative strategy to develop client-centered treatment goals and plans to better engage consumers and address some cases of low intensity service, as well as to use the hiring process and training of current ACT team providers to improve the capacity for integrated, stage-wise treatment of people with co-occurring substance use disorders. Some items that were rated 3 or lower were not addressed for areas of improvement. The ACT team would benefit if Areas of focus were included for several of these items, but we recognize that the center may prefer to maintain their proposed focus.

These prioritized Areas of Focus will be the basis for any technical assistance and follow-up activities with BMHS. Please plan to provide an update on your progress quarterly, beginning March, 2017.

<b>This CMHC self-review resulted in an Implementation rating of:</b>		Fair implementation			
<b>Out of a possible 140 points the CMHC reported a score of:</b>		98			
<b>Improvement Plan Required: Yes</b>					
				Address items: <u>  </u> All items with ratings of $\leq$ <u>  3  </u>	
<b>Score Range</b>		<b>Implementation Rating</b>			
113 - 140		Good Implementation			
85 - 112		Fair Implementation			
84 and below		Not Assertive Community Treatment			

**Human Resources: Structure and Composition**

<b>H1 Small caseload:</b> Consumer/provider ratio = 10:1	<b>Rating = <u>5</u> out of 5</b>
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DHHS Response:	<b>Agree</b>
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<b>H2 Team approach:</b> Provider group functions as team rather than as individual ACT team members; ACT team members know and work with all consumers	<b>Rating = <u>5</u> out of 5</b>
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DHHS Response:	<b>Agree</b>
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<b>H3 Program meeting:</b> Meets often to plan and review services for each consumer	<b>Rating = <u>4</u> out of 5</b>
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DHHS Response:	<b>Acceptable</b>
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<b>H4 Practicing ACT leader:</b> Supervisor of Frontline ACT team members provides direct services	<b>Rating = <u>3</u> out of 5</b>
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DHHS Response:	<b>Need to clarify improvement goal.</b> <b>No improvement goal was noted .</b>
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<b>H5 Continuity of staffing:</b> Keeps same staffing over time	<b>Rating = <u>3</u> out of 5</b>
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DHHS Response:	<b>Need to specify improvement goal</b> <b>Acceptable plan, but no timeline was specified.</b>
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<b>H6 Staff capacity:</b> Operates at full staffing	<b>Rating = <u>3</u> out of 5</b>
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DHHS Response:	<b>Need to specify improvement goal</b> <b>Acceptable plan, but no timeline was specified.</b>
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<b>H7 Psychiatrist on team:</b>	<b>Rating = <u>5</u> out of 5</b>
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At least 1 full-time psychiatrist for 100 consumers works with program	
DHHS Response:	<b>Acceptable. The team is over-staffed for psychiatrist time.</b>

<b>H8 Nurse on team:</b> At least 2 full-time nurses assigned for a 100-consumer program	<b>Rating = <u>2</u> out of 5</b>
DHHS Response:	<b>Need to specify improvement goal.</b>  <b>Acceptable plan</b>

<b>H9 Substance abuse specialist on team:</b> A 100-consumer program with at least 2 staff members with 1 year of training or clinical experience in substance abuse treatment	<b>Rating = <u>1</u> out of 5</b>
DHHS Response:	<b>Need to specify improvement goal</b>  <b>The response seems to indicate an intent to hire a person with addiction treatment training to be on the ACT team; as well as to provide additional training to current team members. If so, this is an acceptable plan and timeline.</b>

<b>H10 Vocational specialist on team:</b> At least 2 team members with 1 year training/experience in vocational rehabilitation and support	<b>Rating = <u>5</u> out of 5</b>
DHHS Response:	<b>Agree</b>

<b>H11 Program size:</b> Of sufficient absolute size to consistently provide necessary staffing diversity and coverage	<b>Rating = <u>4</u> out of 5</b>
DHHS Response:	<b>Agree and need specific improvement goal</b>

## Organizational Boundaries

<b>O1 Explicit admission criteria:</b> Has clearly identified mission to serve a particular population. Has and uses measurable and operationally defined criteria to screen out inappropriate referrals.	<b>Rating = <u>5</u> out of 5</b>
DHHS Response:	<b>Agree</b>

<b>O2 Intake rate:</b> Takes consumers in at a low rate to maintain a stable service environment.	<b>Rating = <u>5</u> out of 5</b>
DHHS Response:	<b>Please note that intakes of up to 6 per month results in a high fidelity rating for this item, thus the team is able to take more clients per month than in the past.</b>

<b>O3 Full responsibility for treatment services:</b> In addition to case management, directly provides psychiatric services, counseling/ psychotherapy, housing support, substance abuse treatment, employment and rehabilitative services.	<b>Rating = <u>4</u> out of 5</b>
DHHS Response:	<b>Agree – need to specify goal</b>

<b>O4 Responsibility for crisis services:</b> Has 24-hour responsibility for covering psychiatric crises.	<b>Rating = <u>?4</u> out of 5</b>
DHHS Response:	<b>The score given was a 4, but the notes do not indicate that the ACT team provides any kind of service after 8 pm – instead the notes indicate that the center’s emergency services provide all crisis services between 8 pm and 8 a.m., suggesting the score should be lower. Please clarify the score and provide goal in this area.</b>

<b>O5 Responsibility for hospital admissions:</b> Is involved in hospital admissions.	<b>Rating = <u>2</u> out of 5</b>
DHHS Response:	<b>Agree – need specific goal</b>  <b>No goal specified to improve this item.</b>

<b>06 Responsibility for hospital discharge planning:</b> Is involved in planning for hospital discharges.	<b>Rating = __5__ out of 5</b>
DHHS Response: <b>Agree</b>	

<b>07 Time-unlimited services (graduation rate):</b> Rarely closes cases but remains the point of contact for all consumers as needed.	<b>Rating = __5__ out of 5</b>
DHHS Response: <b>Agree</b>	

**Nature of Services**

<b>S1 Community-based services:</b> Works to monitor status, develop community living skills in community rather than in office.	<b>Rating = __4__ out of 5</b>
DHHS Response: <b>Agree</b>	

<b>S2 No dropout policy:</b> Retains high percentage of consumers.	<b>Rating = __5__ out of 5</b>
DHHS Response: <b>Agree</b>	

<b>S3 Assertive engagement mechanisms:</b> As part of ensuring engagement, uses street outreach and legal mechanisms (probation/parole, OP commitment) as indicated and as available.	<b>Rating = __5__ out of 5</b>
DHHS Response: <b>Agree</b>	

<b>S4 Intensity of service:</b> High total amount of service time, as needed.	<b>Rating = __2__ out of 5</b>
DHHS Response: <b>Median value reported was .83 hours/week. In comparison, Phoenix data mean past quarter number of minutes among all ACT consumers in ACT cost center was 74 minutes (over an hour). Need specific goal here.</b>  <b>Acceptable plan</b>	

<b>S5 Frequency of contact:</b> High number of service contacts, as needed.	<b>Rating = <u>  2  </u> out of 5</b>
DHHS Response:	<b>Median value reported was 1.4 contacts/week. In comparison, Phoenix data mean past quarter contacts/week was 2.0 contacts/week. Need specific goal here.</b>  <b>Acceptable plan</b>

<b>S6 Work with informal support system:</b> With or without consumer present, provides support and skills for consumer's support network: family, landlords, employers.	<b>Rating = <u>  2  </u> out of 5</b>
DHHS Response:	<b>Need specific goal</b>  <b>Acceptable plan</b>

<b>S7 Individualized substance abuse treatment:</b> 1 or more team members provides direct treatment and substance abuse treatment for consumers with substance-use disorders.	<b>Rating = <u>  1  </u> out of 5</b>
DHHS Response:	<b>Agree. Need specific goal</b>  <b>Acceptable plan</b>

<b>S8 Co-Occurring disorder treatment groups:</b> Uses group modalities as treatment strategy for consumers with substance-use disorders.	<b>Rating = <u>  1  </u> out of 5</b>
DHHS Response:	<b>Agree. Need specific goal</b>  <b>Please specify whether the center plans to implement a group, and if so, when. If not, please indicate your reasoning.</b>

<b>S9 Dual Disorders (DD) Model:</b> Uses a non-confrontational, stage-wise treatment model, follows behavioral principles, considers interactions of mental illness and substance abuse, and has gradual expectations of abstinence.	<b>Rating = <u>  2  </u> out of 5</b>
DHHS Response:	<b>Agree. Need specific goal</b>  <b>Acceptable plan</b>

<b>S10 Role of consumers on team:</b> Consumers involved as team members providing direct services.	<b>Rating = <u>  5  </u> out of 5</b>
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DHHS Response:	<b>Agree</b>
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