

Missouri Behavioral Health Connect

MOCONNECT
Missouri's behavioral health referral network



AGENDA:



- Welcome & Introductions
- Project Background
- OpenBeds Presentation
 - Who We Are
 - Platform Background
 - Demo of System
 - Crisis Management System
 - Implementation
 - Questions and Discussion
- Next Steps
- Closing Remarks



Project Team

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MISSOURI BEHAVIORAL
HEALTH COUNCIL



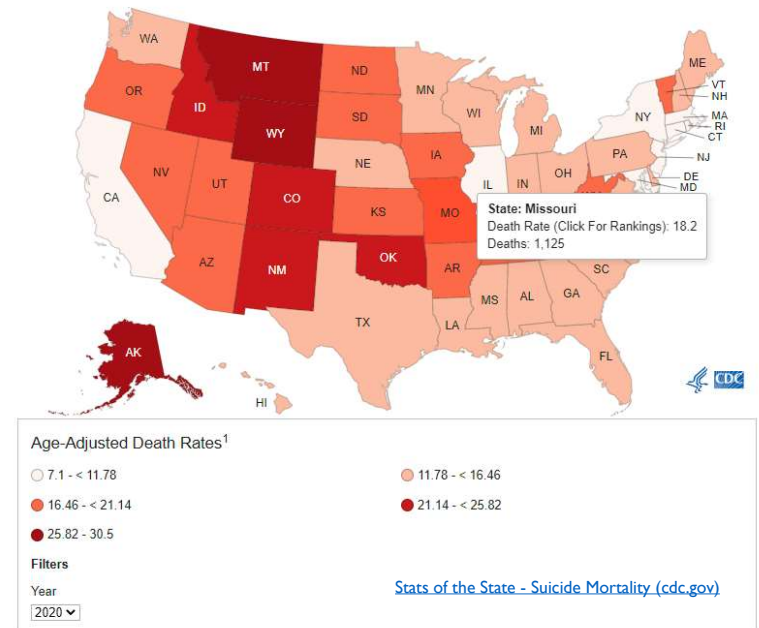
— Missouri Department of —
MENTAL HEALTH

OpenBeds[®]
A BAMBOO HEALTH SOLUTION

Project Background - Why OpenBeds

- Urgent need for crisis module to support 988 statewide
 - Mobile dispatch
 - Intake form
 - Centralized data collection to allow for quality improvement
- Need for a bed registry
 - Best practice recommendation from national guidelines for behavioral health crisis care
 - Abundant amount of time spent calling and searching around to find an available inpatient psychiatric bed
- Need for a statewide referral network to connect all levels of crisis management
 - as well as external referring entities (hospitals, DOC, etc.), public facing
 - closing the referral loop

Suicide Mortality by State



OpenBeds® Platform

Offering better access to behavioral health resources for hospital patients

- OpenBeds is a cloud-based solution that replaces inefficient and less effective manual search, communication, and reporting functions, facilitates rapid transfers/referrals, and fosters collaboration and coordination among medical and mental health providers and substance abuse programs.
- The OpenBeds solution accomplishes this by providing real-time treatment facility availability, evidence-based therapy offerings, two-way digital provider communication, data aggregation and analytics, and clinical decision support.



The Solution Provides

- Real-time inventory of available resources and wait times
- Secure digital communications including email and text capabilities
- Digital registration and authentication
- Digital screening and intake
- Analytics dashboard to track real-time utilization and referral patterns at organization, regional and state levels
- Directed referral capability to specific facility or treatment type
- Feedback regarding treatment engagement
- Clinical decision support tools for clinicians and non-clinicians based on ASAM levels of care
- Connection to wrap-around (social) services and peer support
- Mobile device-enabled allows full functional remote access to the network
- Amazon Web Services cloud-based and secure within HIPAA regulations

OpenBeds

VALUE TO PROVIDERS

Referring Providers navigate an inefficient process. OpenBeds system helps them decrease labor costs through:

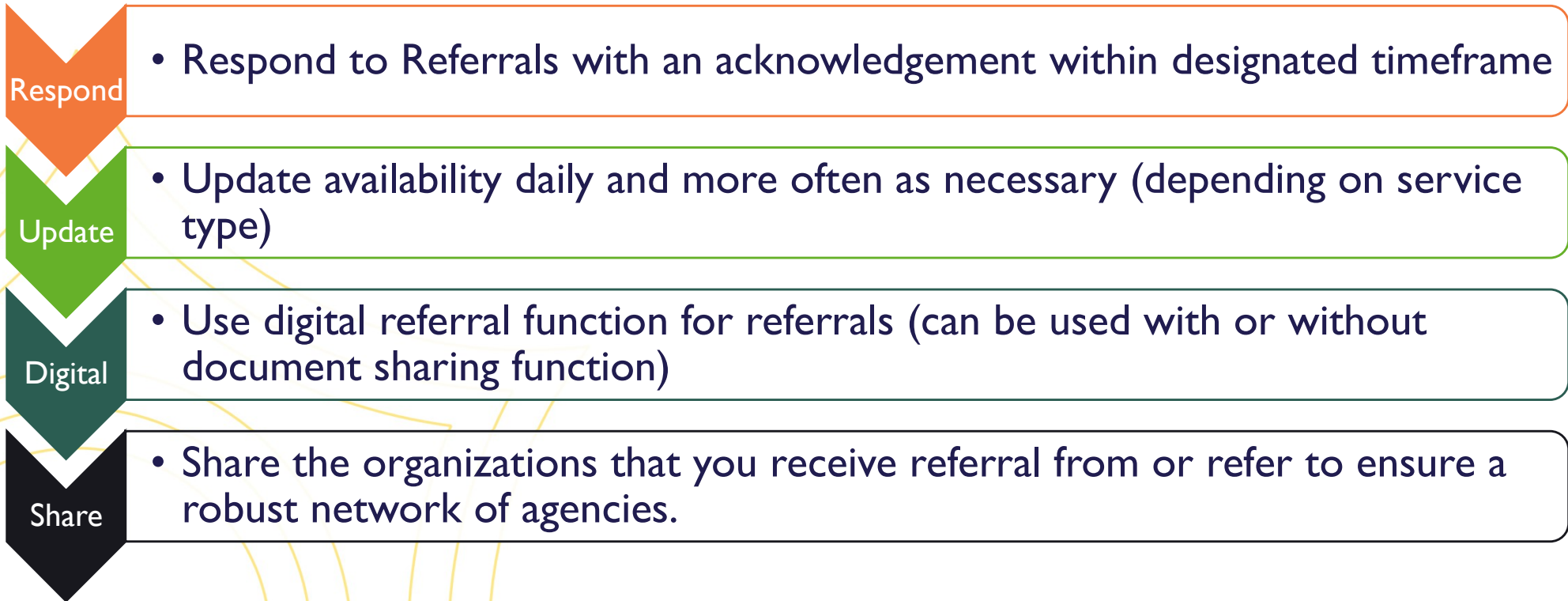
- Immediate, accurate inventory of available resources and wait times
- Direct digital and voice communications links
- Digitized screening and intake
- Formal referral process that extends their efforts into a larger pool of resources
- Decision support regarding the optimal level of care
- Educational resources

SUD and Mental Health Treatment Facilities increase revenues by:

- Filling more inpatient beds and outpatient slots
- Expanding access to clients
- Improving patient matching with services and resources (e.g., staffing)
- Selecting clients according to service lines with the marketplace
- Accessing granular data analytics to improve operations

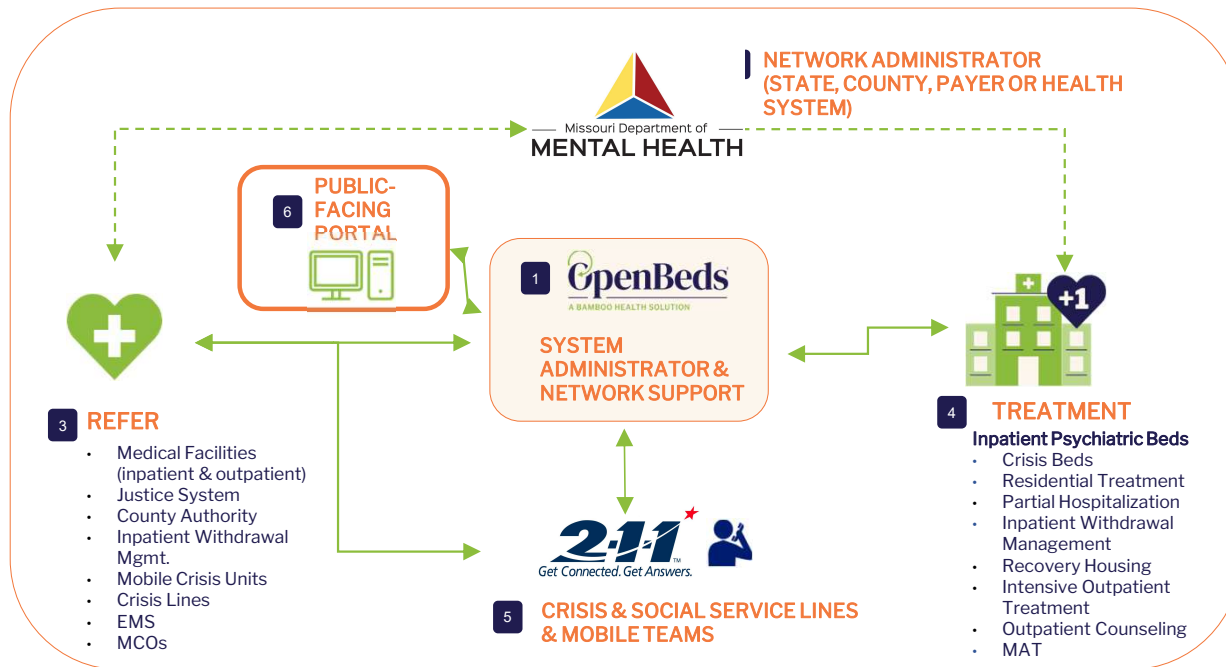


Standards for Success



Overview of OpenBeds and the MOConnect Network

NETWORK IN ACTION



Demonstration

Creating Provider Accounts

Account Configuration Options

Refer-Only



- One account for the Organization
- Multiple users
- May create and send referrals

Receive



- One account for the Organization
- Multiple users
- May receive referrals
- May send referrals from the same account

Multiple Accounts



- Two or more accounts in one organization, e.g., a large hospital
- A psychiatric unit may have a Receiving account
- An emergency department may have a refer-only account

Selection Criteria for Identifying Users

Organization Type	Size	Example	Role	Project Lead	Service Administrator(s)	Updating Availability	Receiving Referrals
Treatment facility: one to two services at same location	small	Recovery House	Predominantly receiving	Clinical Director	Clinical Director	One provider and back-up is planned	One provider or admin assistant at their email address and back-up is planned. Ideally, one person at receiving end for all services.
Treatment facility: more than two services at same location	medium	Inpatient detox and residential treatment	Referring and receiving	Clinical Director	Clinical Director or Access Center Director	Two providers	One provider or admin assistant at their email address and back-up is planned. Ideally, one person at receiving end for all services.
Treatment facility: more than two services at different locations	medium	Hospital with acute inpatient unit and scattered outpatient locations	Referring and receiving	Clinical Director	Clinical Director or Access Center Director - several	Two providers - ideally across all services	Generic/group email manned by several intake personnel - could be two distinct emails for different services if necessary.
Treatment facility: more than two services at different locations	large	Health system with scattered inpatient and outpatient locations	Referring and receiving	Clinical Director or Business Development Officer	Clinical Director or Access Center Director - several	Two providers - ideally across all services	Generic/group email manned by several intake personnel - could be two distinct emails for different services if necessary.

We advise fewer rather than more users

MConnect Provider Locations List

 CCBHC Providers

 ACI Providers

 988 Providers

 BHCC Providers

CCBHO PROVIDERS	ACI PROVIDERS	988 PROVIDERS	BHCC PROVIDERS
AMANDA LUCKETT MURPHY HOPEWELL CENTER BJC BEHAVIORAL HEALTH BOOTHEEL COUNSELING SERVICES BURRELL, INC. CLARK COMMUNITY MENTAL HEALTH CENTER COMMUNITY COUNSELING CENTER COMMUNITY TREATMENT, INC. COMPASS HEALTH, INC. COMPREHENSIVE MENTAL HEALTH SERVICES EAST CENTRAL MENTAL HEALTH SERVICES (ARTHUR CENTER)* FAMILY COUNSELING CENTER, INC. FAMILY GUIDANCE CENTER MARK TWAIN ASSOCIATION FOR MENTAL HEALTH, INC. NORTH CENTRAL MISSOURI MENTAL HEALTH CENTER OZARK CENTER OZARK HEALTHCARE BEHAVIORAL HEALTH CENTER* PLACES FOR PEOPLE PREFERRED FAMILY HEALTHCARE, INC. REDISCOVER SWOPE HEALTH SERVICES TRI-COUNTY MENTAL HEALTH SERVICES UNIVERSITY HEALTH (TRUMAN)*	AMANDA LUCKETT MURPHY HOPEWELL CENTER BJC BEHAVIORAL HEALTH BOOTHEEL COUNSELING SERVICES BURRELL, INC. CLARK COMMUNITY MENTAL HEALTH CENTER COMMUNITY COUNSELING CENTER COMMUNITY TREATMENT, INC. COMPASS HEALTH, INC. COMPREHENSIVE MENTAL HEALTH SERVICES EAST CENTRAL MENTAL HEALTH SERVICES (ARTHUR CENTER)* FAMILY COUNSELING CENTER, INC. FAMILY GUIDANCE CENTER MARK TWAIN ASSOCIATION FOR MENTAL HEALTH, INC. NORTH CENTRAL MISSOURI MENTAL HEALTH CENTER OZARK CENTER OZARK HEALTHCARE BEHAVIORAL HEALTH CENTER* PLACES FOR PEOPLE PREFERRED FAMILY HEALTHCARE, INC. REDISCOVER SWOPE HEALTH SERVICES TRI-COUNTY MENTAL HEALTH SERVICES UNIVERSITY HEALTH (TRUMAN)*	BURRELL, INC. COMPASS HEALTH, INC. OZARK CENTER BEHAVIORAL HEALTH RESPONSE (BHR) COMMUNITY NETWORK FOR BEHAVIORAL HEALTHCARE, INC. (COMM CARE) PROVIDENT BEHAVIORAL HEALTH DEAFLEAD	BJC BEHAVIORAL HEALTH BURRELL, INC. COMMUNITY COUNSELING CENTER COMPASS HEALTH, INC. FAMILY COUNSELING CENTER, INC. FAMILY GUIDANCE CENTER MARK TWAIN ASSOCIATION FOR MENTAL HEALTH, INC. OZARK CENTER OZARK HEALTHCARE BEHAVIORAL HEALTH CENTER* PREFERRED FAMILY HEALTHCARE, INC. REDISCOVER SSM HEALTH BEHAVIORAL HEALTH
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BEHAVIORAL HEALTH RESPONSE (BHR) COMMUNITY NETWORK FOR BEHAVIORAL HEALTHCARE, INC. (COMM CARE)	BEHAVIORAL HEALTH RESPONSE (BHR) COMMUNITY NETWORK FOR BEHAVIORAL HEALTHCARE, INC. (COMM CARE)		
* = ONBOARDING CCBHO			

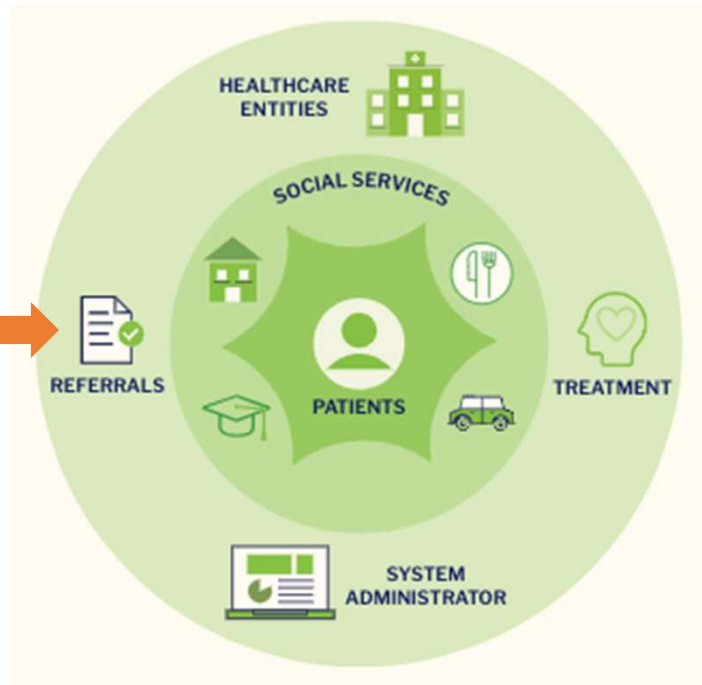
Referring Side Stakeholders

What does a successful Referring Side in the system look like?

- ✿ Qualitative Referring Sources
 - ✿ Hospital EDs
 - ✿ Crisis Lines/988 Triage Centers
 - ✿ Department of Corrections & Treatment Courts
- ✿ These entities **only** send outbound referrals and don't provide services
- ✿ Dedicated Resource: Haley Harkins – Missouri Network Success Manager
 - ✿ Email: hharkins@bamboohealth.com
- ✿ Example: Region IX – Nebraska
 - ✿ 12 ED's in Omaha
 - ✿ Accounted for 6,100 Referrals in 12 months.
- ✿ Example: Crisis Support Services of Nevada – Nevada
 - ✿ Account for 82% of Referral Activity on the Network.

Best Practices for System Success

OpenBeds – Objective & Keys to Success



Successful OpenBeds Networks require:

- A robust network of referring and receiving entities.
- A volume of referrals to make the service useful and relevant to users.
- Accurate & up to date information in the platform (bed availability & responses)

The greatest success we have had comes when the Network Convenor *and* Bamboo Health are partnered together and aligned on responsibilities and expectations.



Network Goals

Referring Providers:

Access an immediate, accurate inventory of available treatment and social resources and wait times

Gain efficiency with direct digital communications, file attachments, and useful analytics

Available decision support tools to help identify an optimal level of care

Select from larger pool of treatment resources that are appropriate for your clients

Treatment Facilities:

Better match patients with facility services and resources—reduce number of declined referrals

Access to a larger network of referring entities expands your pool of potential clients

Increase the total number of clients served both inpatient outpatient

Accessing granular data analytics to improve operations

Crisis Management System

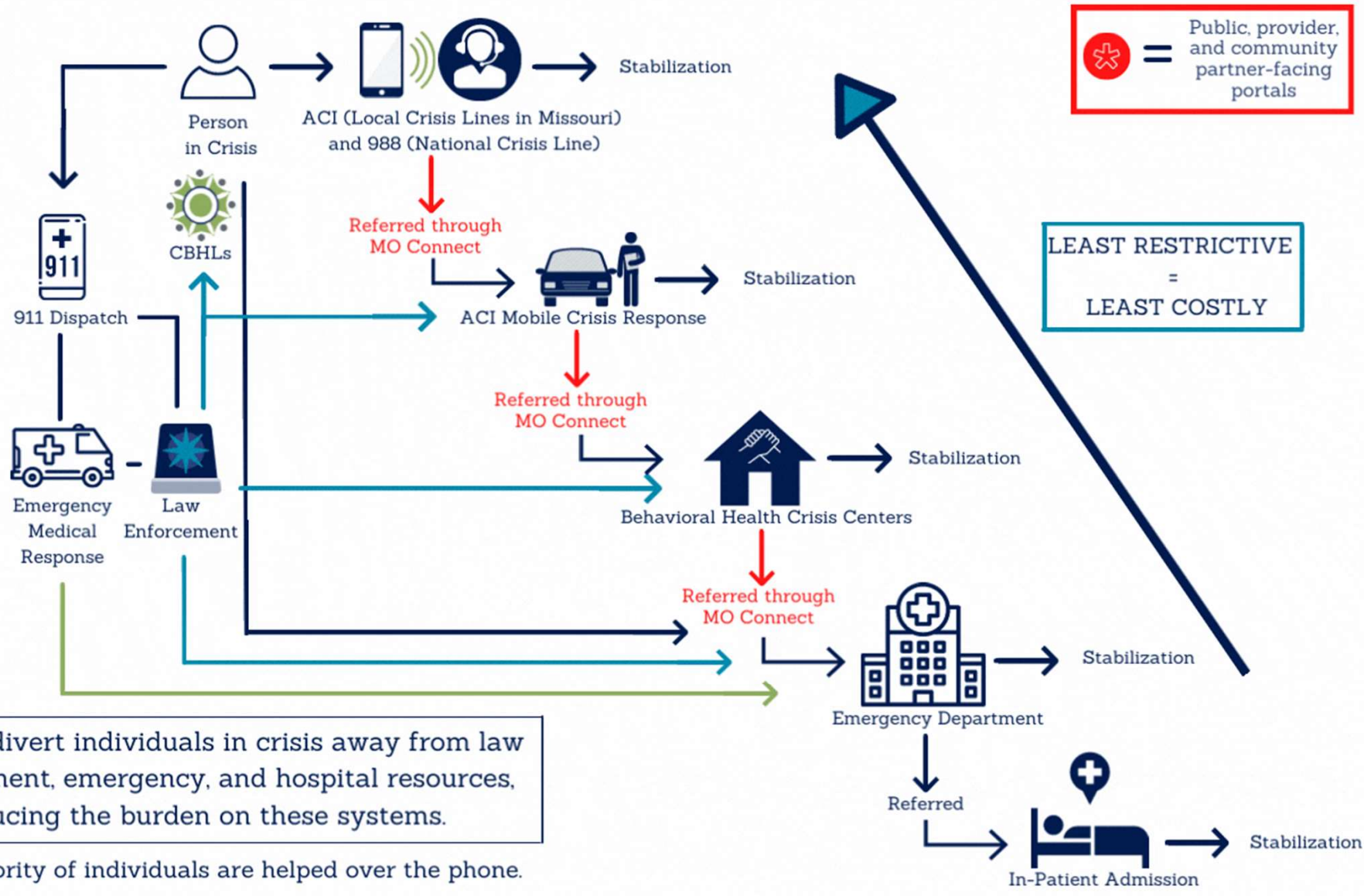


Crisis Management System

HELP FOR THOSE WHO NEED IT THE MOST

The Bamboo Health Crisis Management solution expedites access to assessment and treatment for those in crisis, tracks their journey from call to treatment, and coordinates all stakeholders within a crisis management system





= Public, provider, and community partner-facing portals

LEAST RESTRICTIVE
=
LEAST COSTLY

988 will divert individuals in crisis away from law enforcement, emergency, and hospital resources, reducing the burden on these systems.

*A majority of individuals are helped over the phone.

National Focus on Crisis Management

SAMHSA Best Practices to Standardize Care Processes and Quality

What does a successful crisis management system look like?

- ✿ Standardizes crisis care processes and quality
- ✿ Provides effective suicide prevention
- ✿ Focuses on resolving mental health and SUD conditions
- ✿ Decreases psychiatric bed overuse and eliminates ED boarding
- ✿ Decreases drain on law enforcement
- ✿ Decreases fragmentation of behavioral health care



Supporting the Crisis Continuum

EXCEEDING SAMSHA'S REQUIREMENTS

CRISIS HOTLINE

- Available 24/7, 365 days per year to dispatch a mobile crisis response, whether community services or first responders (paramedics or police).
- Hotline also supports 988, the National Suicide Prevention Lifeline.

MOBILE CRISIS

- Services that respond to people in the community wherever they are and provide crisis intervention and stabilization.

REFERRAL

- Crisis stabilization for those who need more targeted support in an alternative community location to a hospital.
- Definitive assessment or treatment, inpatient or outpatient.

OpenBeds technology supports the full continuum of crisis care:

Bed registry, GPS-enabled dispatch, outpatient scheduling, and real-time data dashboards

Crisis Management System

OVERVIEW OF SERVICES AND BENEFITS

Real-time Impact

Gain real-time situational awareness and connection to all crisis system stakeholders so that you can quickly identify and refer patients to the right inpatient or outpatient treatment facility directly from the cloud-based module.

Mobile Dispatch with GPS-enabled Functionality

Use our Mobile Crisis Module's map functionality to see the proximity and availability of mobile crisis units, dispatch them, and conveniently communicate a patient's information directly from the module—expediting the referral process for all parties.

Tracking Capability

Track mobile crisis services via GPS on one dashboard and behavioral health services on a second dashboard—along with provider capacity and treatment capabilities—so that you always have the flexibility you need for patient referrals.

Bi-directional System to Support a Digital Referral Process and Information Sharing

Leverage our technology to avoid frustrating and time-consuming manual processes, make digital referrals, and learn whether a patient is a "Show" or "No-show."

Monitoring and Interfacing with a Bed Tracking Inventory System

Be closely connected to providers and organizations in your state and close more treatment loops with bed capacity data from crisis stabilization units, group homes, inpatient SUD treatment programs, opioid treatment programs, and many more.

Data Dashboards with Real-time Outcomes

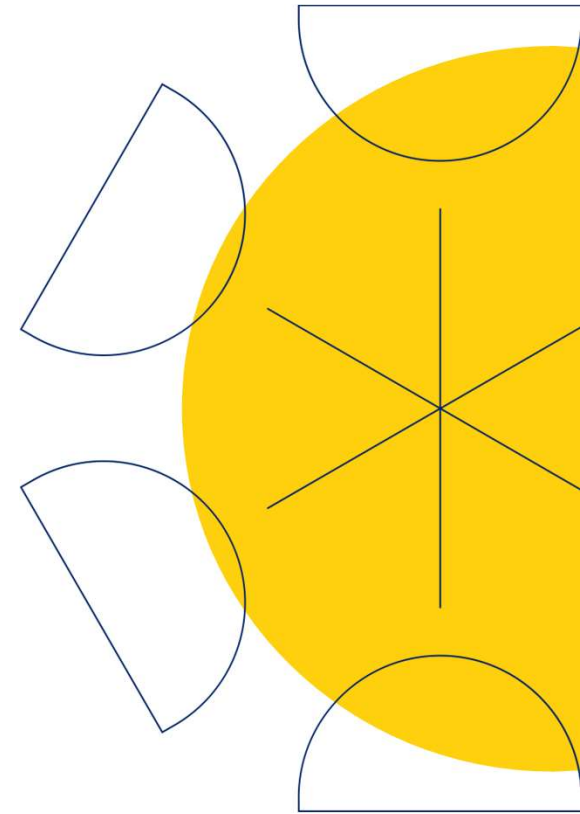
View clear dashboards with real-time data around crisis call dispatches and response times, referral to treatment and access outcomes, and general use of the system so that you are aware of opportunities and can inform stakeholders.

Crisis Response Tracking

Data Dashboards with Real-time Outcomes

The module tracks users' interactions, including date and time stamps for key events to calculate the following:

- ✿ Frequency of crisis team dispatch
- ✿ Time to dispatch
- ✿ Mean response time (dispatch to team arrival)
- ✿ Time at scene (time of team arrival to time of departure from location)
- ✿ Time to disposition (time of dispatch to ultimate disposition)
- ✿ Frequency of 1- or 2-person response
- ✿ Frequency of outcomes (level of care the individual was referred to and percentage)
- ✿ Frequency of diversion from higher level of care and percentage
- ✿ The above metrics are calculated by team, county, and region



Crisis Management System Demonstration

Onboarding Process

Implementation

MOVING FORWARD

- 1 Orientation** – Briefing exec team and project lead on concept and next steps 
- 2 Contracting** – Each member accepts Terms & Conditions and executes a BAA with OB 
- 3 Configuration** – Project Leads work directly with OB Onboarding team to configure their services 
- 4 Workflow Analysis** – Upon request, determine best fit into operations and identify users 
- 5 Training** – All users attend a training session offered via the OB LMS Course, via live webinar with the OB training team or via a Train the Trainer Course 
- 6 Rehearsal Exercise** – Conduct network activities to validate account information and skills 
- 7 Network Launch** – Network members begin sending and receiving referrals on live OpenBeds Network 
- 8 Post-Launch** – Multiple tasks designed to maintain and support the network 





Questions & Next Steps





Thanks for joining us

