
North Dakota Department of Health and Human Services Behavioral Health Division (BHD)

North Dakota Behavioral Health Bed Management System Standards and Usage Guidelines

Overview

The 67th North Dakota Legislative Assembly (2021) created NDCC 50-06-41.3 identifying HHS will establish a Behavioral health bed management system to improve the utilization of behavioral health bed capacity.

The purpose of the North Dakota Behavioral Health Bed Management System is to:

1. Improve care coordination by
 - a. Increasing awareness of placement options,
 - b. Reduce wait times, and
 - c. Decrease distance to access a residential or inpatient behavioral health service.
2. Increase transparency,
 - a. Identify day-to-day supply and demand, and
 - b. Confirm gaps and barriers.
3. Assist with strategic planning,
 - a. Ensure that the right types and amounts of beds are available, and
 - b. Identify and address community and state level service gaps.

To fulfill the purpose of the North Dakota Bed Management System your organization's active participation and adherence to these Standards and Guidelines will help North Dakota achieve the intended benefits of this system for our citizens.

Agreements

Each participating facility must complete the required paperwork including, but not limited to, the Bamboo Health No-Fee Subscription Agreement and a Business Associate Agreement.

Facility Primary Contact

Each participating facility shall appoint a primary contact for the facility. The primary contact will also be responsible for:

1. Ensuring users complete training prior to utilizing the system.
2. Responding to communications from BHD including data requests, completing required training and surveys, and other related tasks.
3. Identifying, entering and approving appropriate users at their facility for access to OpenBeds.
4. Removing usernames as soon as possible (generally 24 hours) when the user no longer serves in that capacity for the facility or is no longer working at the facility.
5. Confirming the service (and Facility) details are complete and updated as needed.
6. Ensuring users at their facility are updating any additional required information, as outlined below.

General Usage

All users shall utilize OpenBeds in an appropriate manner, including providing accurate, up-to-date information for the appropriate capacity under which they are using OpenBeds.

1. Contact Bamboo Health technical support at the URL or phone number provided below if a technical issue arises.
 - Bamboo Health Support:
 - i. Online support center: <https://openbeds.zendesk.com/hc/en-us>
 - ii. Phone: **833-275-2045**
2. Report any repetitive concerns or challenges experienced with specific facilities in making or receiving referrals through OpenBeds to:
 - James Knopik <jknopik@nd.gov>
 - Shae Stober <lstoiber@nd.gov>
 - Leah Jangula <ljangula@nd.gov>

Updating Urgent Access Appointment Availability

OpenBeds date and time stamps each time a facility updates its next available appointment time(s), or comments, in order to provide necessary information to the referring population and, more importantly, prevent referrals from inadvertently being sent to facilities with no availability. There is a balance between providing sufficient information to prevent declined referrals and the burden of updating availability. Thus, we expect all residential and inpatient provider availability to be updated at least once daily prior to 12pm CT. Geriatric psychiatric beds shall be updated in the system on an as needed basis as changes occur or at least once every 3 months. Performed correctly, collectively, and consistently throughout the network, this action will increase confidence in our network and help reduce the number of declined referrals and provide the state with information that will help it identify gaps in care and, therefore, better target resources.

Requirements

Service Type	Frequency	Notes
Residential and Inpatient	Once Daily 12pm CT	Recommend updating comments to reflect and program specific information, such as admission/referral considerations or clarifying if beds are not gender specific, etc.
Geriatric Psychiatric	As Necessary at least quarterly	Recommend using comments to identify waitlist or projected availability

Residential and Inpatient Service Type refers to Psychiatric Hospitalization, State Hospital Units, Psychiatric Residential Treatment Facilities for Youth, Substance Use Disorder Residential, Withdrawal Management/ Social Detoxification, Crisis Stabilization Facility, and Transitional Living Facility.

Operational and Licensed Beds

Add in the program's Operational and Licensed Bed counts under Service Administration.

If operational bed counts decrease (even temporarily, such as a staffing shortage), please make sure to update this as needed.

Acknowledging and Responding to Digital Referrals

In addition to more effectively and efficiently placing individuals into the right level of care, the OpenBeds platform captures key and essential referral process and outcome information through the use of a digital referral form that would not otherwise be captured through manual (phone call/fax) referral processes. OpenBeds, through its partnership with Beacon

Health Options, provides this information to the state in a de-identified and aggregated manner. The state intends to use this information to help identify gaps in care delivery, inform resource allocation decisions, capture best practices, better pool resources, and connect patients to services in the event of a crisis. Your adherence and enforcement of the requirements below will both increase the likelihood of more successful treatment outcomes, more efficient operations at your facilities, and the availability of information the state may use to make system-wide improvements.

Requirements

1. Use the digital referral forms between network members.
2. Replace faxes with file attachments to digital referrals or subsequent communications.
3. Assign and ensure users are monitoring OpenBeds for responses.
4. Acknowledge (respond to) referrals and subsequent communications within the next business day.
5. Use the "Accept" or "Decline" radio buttons.
6. Provide feedback regarding referral outcome, e.g., client showed up for intake assessment.
7. Use the "Open" and "Close" radio buttons.

Goals

Goal 1: Accurate bed availability reporting for service providers and crisis staff with decreased manual effort determining if facility meets patient/client needs.

Goal 2: 95% of targeted facilities report bed availability data on a daily basis.

Goal 3: Statewide bed utilization data and reports are available to authorized stakeholders.