



MSDP Standardized Documentation Pilot Study Announced

NOTICE:

Second Mailing with Change in Pilot Study and Submission Dates

This second MSDP Pilot Study UPDATE is being sent to notify MHSACM members of revised dates for the Pilot Study which will be held in March and April 2008. As a result, the Pilot Study Participation Request Forms submission **deadline has been extended until January 10, 2008**. The MSDP Quality Management Council (QMC) made the decision to move the pilot study in order to provide members additional time to assess local program participation options with staff.

The QMC is seeking MHSACM members to participate in the study by piloting the standardized forms and processes produced by the MSDP teams.

The focus of the MSDP documentation development process has been to move beyond historical documentation models that recorded the minimum level of information to a focus on a documentation process that supports a person-centered/recovery service delivery model.

The following stakeholders have participated in the MSDP initiative to help design the standardized documentation processes with a clear focus on the goals of improved quality of care, increased administrative efficiencies, and full legal, regulatory, and accreditation compliance:

- Mental Health and Substance Abuse Corporations of Massachusetts (MHSACM)
- Executive Office of Health and Human Services (EOHHS)
- Department of Mental Health (DMH)
- MassHealth
- Department of Public Health Bureau of Substance Abuse Services DPH/BSAS
- Massachusetts Behavioral Health Partnership (MBHP) Medicaid Carve Out
- Medicaid Managed Care Organizations (MMCOs):
 - BMC HealthNet,
 - Neighborhood Health Plan,
 - Fallon Community Health Plan
 - Network Health.
- Consumer/Families and Advocate Organizations:
 - Parent Professional Advocacy League (PPAL)
 - National Alliance for the Mentally Ill of Massachusetts (NAMI)
 - The Consumer Quality Initiative (CQI)
 - Massachusetts Organization for Addiction Recovery (MOAR)
 - Massachusetts People/Patients Organized for Wellness, Empowerment and Rights (M-Power)

The Standardized Documentation Team (SDT) of the MSDP has designed standardized documentation forms and processes for programs serving children, adolescents and adults receiving mental health and

substance abuse services. The forms and processes constructed by the SDT are grouped under five categories in the table below.

Assessment Group	Treatment Plan Group	Progress Note Group
<ul style="list-style-type: none"> • Personal Information • Adult Comprehensive Assessment (CA) • Adult CA Update • Child/Adolescent CA • Child/Adolescent CA Update • Mental Status Exam • Risk Assessment • Daily Living Skills • Psychiatric Evaluation • Tobacco Assessment • HIV Risk Assessment • Health History 	<ul style="list-style-type: none"> • Individualized Action Plan (IAP) • IAP Review/Revision • Psychopharmacology Plan • Detox Plan • Multi-Disciplinary Team Review/Response 	<ul style="list-style-type: none"> • Outreach Services • Consultation/Collateral Contact • Group Psychotherapy • Psychotherapy • Intensive Services • Monthly Progress Note • Psychopharmacology • Shift/Daily • Weekly • Methadone • Nursing Note
Transition Group	Optional Group	
<ul style="list-style-type: none"> • Transition/Discharge Summary • Transition/Discharge Plan 	<ul style="list-style-type: none"> • Informed Consent • Primary Care Release • Advanced Directives • Internal Communication 	

NOTE: Each of the above form types will be included in the Pilot Study based on appropriate use by individual programs in the pilot study.

While the ultimate outcome of MSDP is the development of electronic health record, each form type will be available for the pilot study in two formats:

- PDF Versions that can be printed/copied to serve as manual paper forms
- E-forms that are designed in WORD which will facilitate the local use of computer based data entry.

To ensure that the proposed forms and processes meet the compliance needs of community-based providers, the MSDP’s Compliance Review Team (CRT) identified five areas of compliance which the documentation forms and processes must address to be used in community-based settings. Those five areas are listed in the following table.

State Payer	Managed Care	National Accreditation	Federal Payers	Medicaid/Medicare Documentation Support Focus
<ul style="list-style-type: none"> • MEDICAID/ DMA 	<ul style="list-style-type: none"> • MBHP 	<ul style="list-style-type: none"> • JCAHO 	<ul style="list-style-type: none"> • Medicaid 	<ul style="list-style-type: none"> • Medical Necessity
<ul style="list-style-type: none"> • DMH 	<ul style="list-style-type: none"> • State MCOs 	<ul style="list-style-type: none"> • COA 	<ul style="list-style-type: none"> • Medicare 	<ul style="list-style-type: none"> • Client Participation
<ul style="list-style-type: none"> • DPH - BSAS 		<ul style="list-style-type: none"> • CARF 		<ul style="list-style-type: none"> • Client Benefit
<ul style="list-style-type: none"> • DPH - HCQ 		<ul style="list-style-type: none"> • NCQA 		

The Pilot Study is essential to ensure that the forms and processes designed will meet the needs of community-based providers of mental health and substance abuse services. ***MHSACM members are encouraged to participate by using and evaluating the pilot forms in a formal six week pilot study in March and April 2008.*** The Pilot Study will allow MHSACM members an opportunity to assess their current processes around service delivery, documentation, and compliance while also contributing to the success of the MSDP.

The QMC has established several selection criteria to guarantee that the standardized documentation forms and processes are used in a number of different mental health and substance abuse program settings. The criteria for selection of Pilot participants are:

Standardized Documentation Pilot Program Selection Criteria

1. A regional mix of programs
2. A cross section of providers of mental health and substance abuse services that include the types of programs that will use all of the MSDP form types/processes developed (i.e., Detox, CBAT, etc.)
3. A cross section of programs for child/adolescent and adult services
4. Pilot programs will ensure that each staff participating in the pilot will optimally use each MSDP documentation process seven times
5. Pilot programs will represent a mix of national accreditation (JCAHO, CARF, NCQA and COA)
6. A mix of types of port of entry into service including centralized access to care and unit/program based intakes into service
7. Participating programs agree to send staff to a statewide pilot study one day training session on Thursday, March 6, 2008 in order to provide a "Train the Trainer" model to support training for local program staff that will participate in the pilot
8. Pilot program staff agree to utilize new documentation processes throughout the period of the pilot study
9. Pilot programs agree to participate in the MSDP Pilot Study Evaluation Program including completion of two levels of evaluation as follows:
 - a. Program-Based Evaluation Instrument
 - b. Individual Participating Direct Care Staff Evaluation
10. Agrees for program staff to participate, if requested, as a Trainer/Consultant in a single event regional/statewide implementation training later in 2008

Programs participating in the pilot study will have an opportunity to provide valuable leadership and feedback that will help determine the final standardized documentation forms and processes that will be implemented statewide in 2008.

Programs that want to participate in the pilot study are encouraged to review the Participant Request form below. A user friendly separate electronic version of this form will be emailed to each member of MHSACM to accommodate electronic submission to email addresses: vdigravio@mhsacm.org and mtmserve@aol.com Also, if needed, a completed paper version of the form can be completed and mailed to MHSACM, 251 West Central Street, Suite 21, Natick, MA, 01760, or **faxed** to: 508-647-8311. **Submission for consideration to become a pilot study participant should be received by no later than the end of business on Thursday, January 10, 2008.**

MSDP Pilot Study Program Participation Request Form

Agency Name:		Date:	
Address:			
City:	State: MA	Zip:	
Contact Person:	Work Area/Title:		
Phone Number of Contact Person:	E-mail Address of Contact Person:		

Our program(s), as identified below, desires to participate in the Standardized Documentation Pilot Study under the selection criteria listed below. Please Check the Program(s) that will participate in the pilot study and complete all columns of information for only the selected program(s):

Programs in the MSDP Pilot Study	Number of Persons Served Monthly	Estimated Percent of Persons Served Monthly to be Included in Pilot	Population Served A = Adults C = Child/Adoles A/C – Adult and Child/Adoles.	National Accreditation? (None, JCAHO, CARF, COA, NCQA or Other - Indicate)	Indicate DMH Area or DPH Region
<input type="checkbox"/> Community Based Acute Treatment (CBAT)					
<input type="checkbox"/> Community Rehabilitation Services (CRS)					
<input type="checkbox"/> Community Support Program (CSP)					
<input type="checkbox"/> Child Day Services					
<input type="checkbox"/> Crisis Stabilization Unit (CSU)					
<input type="checkbox"/> Day Rehabilitation					
<input type="checkbox"/> Detox - Enhanced Acute Treatment Services (EATS)					
<input type="checkbox"/> Detox - Level III (Inpatient: Pregnant Women)					
<input type="checkbox"/> Detox - Level III A (Inpatient)					
<input type="checkbox"/> Detox - Level III B (Inpatient: Residential/Dual Diagnosis)					
<input type="checkbox"/> Detox - Level III.V (Short Term Intensive Inpatient Treatment)					
<input type="checkbox"/> Detox - Level IV (Inpatient: All Inclusive Detox Adult/Adolescents)					
<input type="checkbox"/> Detox - Outpatient					
<input type="checkbox"/> Detox - Adolescent					
<input type="checkbox"/> Dual Diagnosis Acute Residential Treatment (DDART)					
<input type="checkbox"/> Emergency Services Program (ESP)					
<input type="checkbox"/> Family Stabilization Team (FST)					
<input type="checkbox"/> Flex Support Program					
<input type="checkbox"/> Intensive Community Based Acute Treatment (ICBAT)					
<input type="checkbox"/> Intensive Outpatient Program - Substance Abuse (IOP)					
<input type="checkbox"/> Intensive Residential Treatment Program					
<input type="checkbox"/> Opiate Treatment Program					
<input type="checkbox"/> Outpatient Mental Health					
<input type="checkbox"/> Outpatient Substance Abuse					
<input type="checkbox"/> Partial Hospitalization Program (PHP)					
<input type="checkbox"/> Program of Assertive Community Treatment (PACT)					
<input type="checkbox"/> Psychiatric Day Treatment					
<input type="checkbox"/> Rehabilitative Treatment in the Community (RTC)					
<input type="checkbox"/> Residential Services - Adult DMH					
<input type="checkbox"/> Residential Services - Adult DPH					
<input type="checkbox"/> Residential Services - Child/Adolescent DMH					
<input type="checkbox"/> Residential Services - Child/Adolescent DPH					
<input type="checkbox"/> Respite					
<input type="checkbox"/> Structured Outpatient Addiction Program (SOAP)					
<input type="checkbox"/> Supported Education and Employment					
<input type="checkbox"/> Transitional Support Services (TSS)					

Port of Entry Model Used: <input type="checkbox"/> Centralized Access Within Agency <input type="checkbox"/> Location/Program/Unit Based Access
Our program(s) agrees to participate in the MSDP Pilot Study at the following levels of participation: <ol style="list-style-type: none"> 1. Agrees for program staff to participate, if requested, as a Trainer/Consultant in a single event regional/statewide implementation training later in 2008 2. Pilot program staff agree to utilize new documentation processes throughout the period of the pilot study 3. Participating programs agree to send staff to a statewide pilot study Orientation/Training to be held the first week of March 2008 in order to provide a "Train the Trainer" model to orient/train local program staff that will participate in the pilot 4. Pilot programs agree to participate in the MSDP Pilot Study Evaluation Program including completion of two levels of evaluation as follows: <ol style="list-style-type: none"> a. Program-Based Evaluation Instrument b. Individual Participating Direct Care Staff Evaluation Tool
Signature of Program Representative:
Please submit this form on or before <u>Thursday, January 10, 2008</u>

All programs selected to participate will be notified in February 2008 to provide adequate time to prepare for the pilot and local training in March 2008.

For further information regarding the MSDP initiative and the Standardized Documentation Project Team please refer to the MSDP Initiative web site at: <http://mtmservices.org/MSDP-Update.html> contact Vic DiGravio, Quality Management Council Facilitator email address: vdigravio@mhsacm.org or by phone at (508) 647-8385.