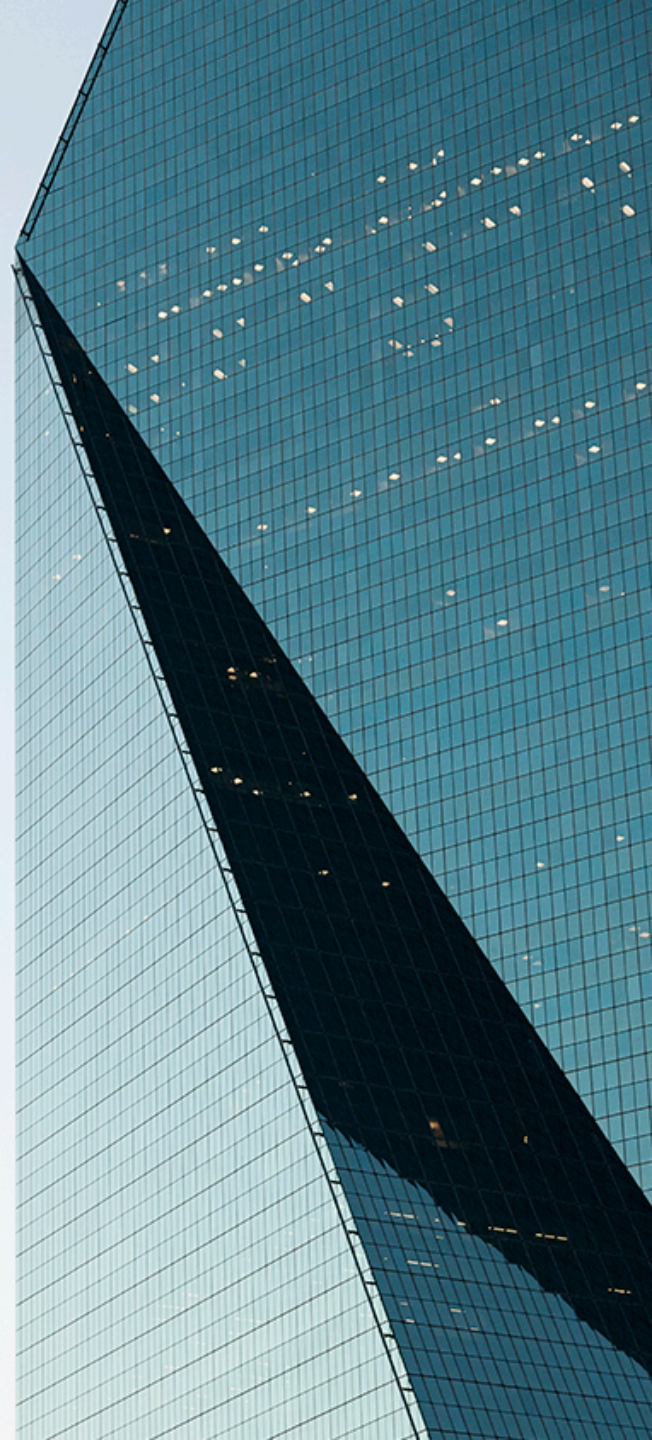




# Rotman Conference on Mental Health: Improving Access to Care

**Speaker: Vivian Demian, MSW, RSW, MBA, BBLSS**  
Executive Director, Advisory

**November 26<sup>th</sup>, 2019**



# Why we Get Involved

## The Issues

- Wait Lists
- No-show and cancelation rates
- Unmet need
- County-wide impacts

## The Goals

- Optimize **staff utilization**
- Increase **quantity of direct service** time
- Enhance **access to mental health** services
- Embed **performance management** into department and clinic culture

## Client Profile

- 45 mental health outpatient programs across 25 sites in three geographic regions
- 42 program supervisors
- 500+ direct service employees

# Our Approach

## What did we do?



### Productivity Dashboards

- Analysis of staff activities, workload, and productivity compared against the baseline period
- Cascading performance dashboards for each level of the organization



### Facilitation

- Weekly performance data review with clinic and regional leaders
- Data-driven decision making in the areas of personnel management, clinic processes, and service design



### Coaching

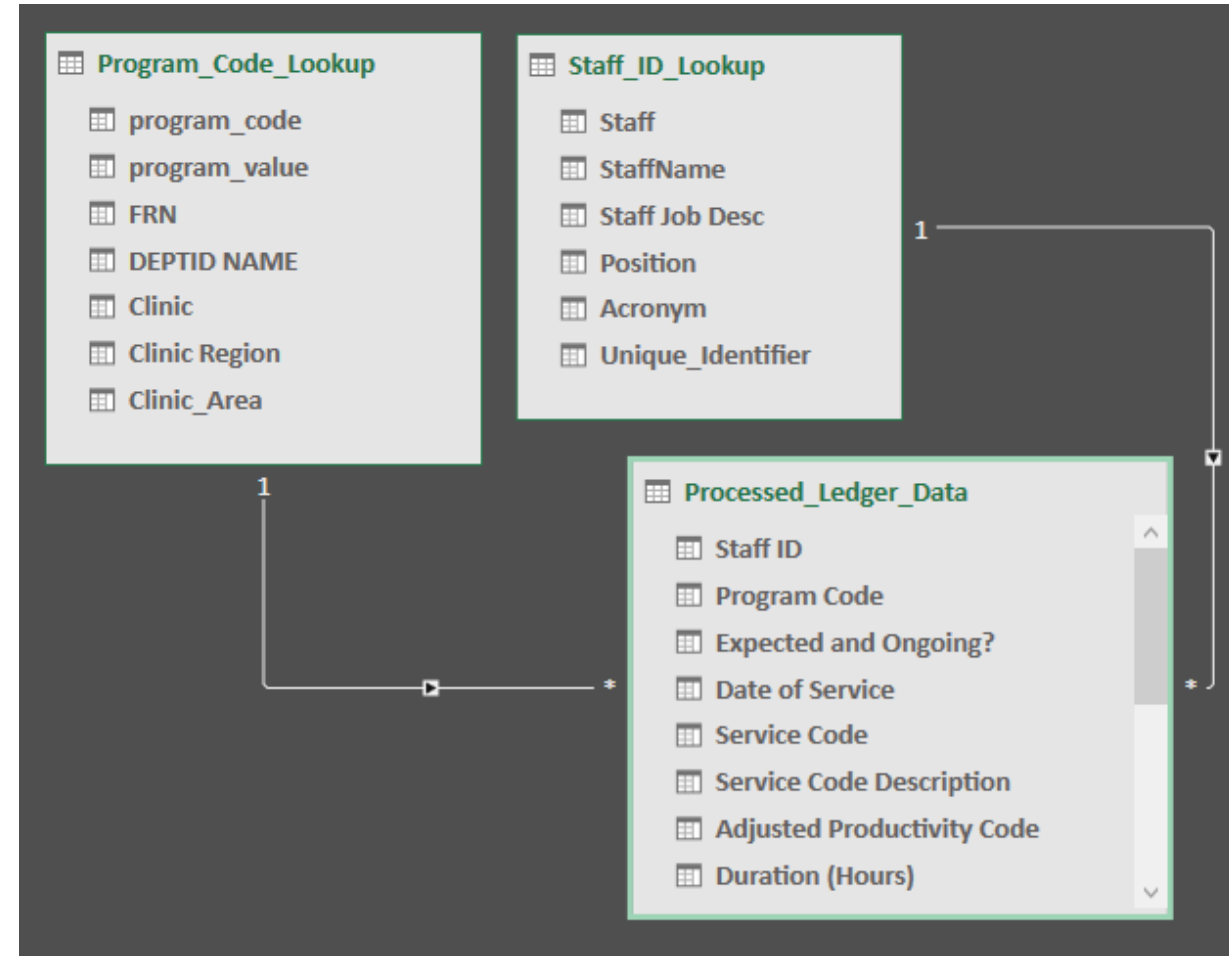
- Assisted program leaders 1:1 in reviewing staff performance data and designing strategies to boost productivity
- Leading practices in the areas of First Episode Psychosis, Assertive Community Treatment, and Case Management



### Handover and Sustainment

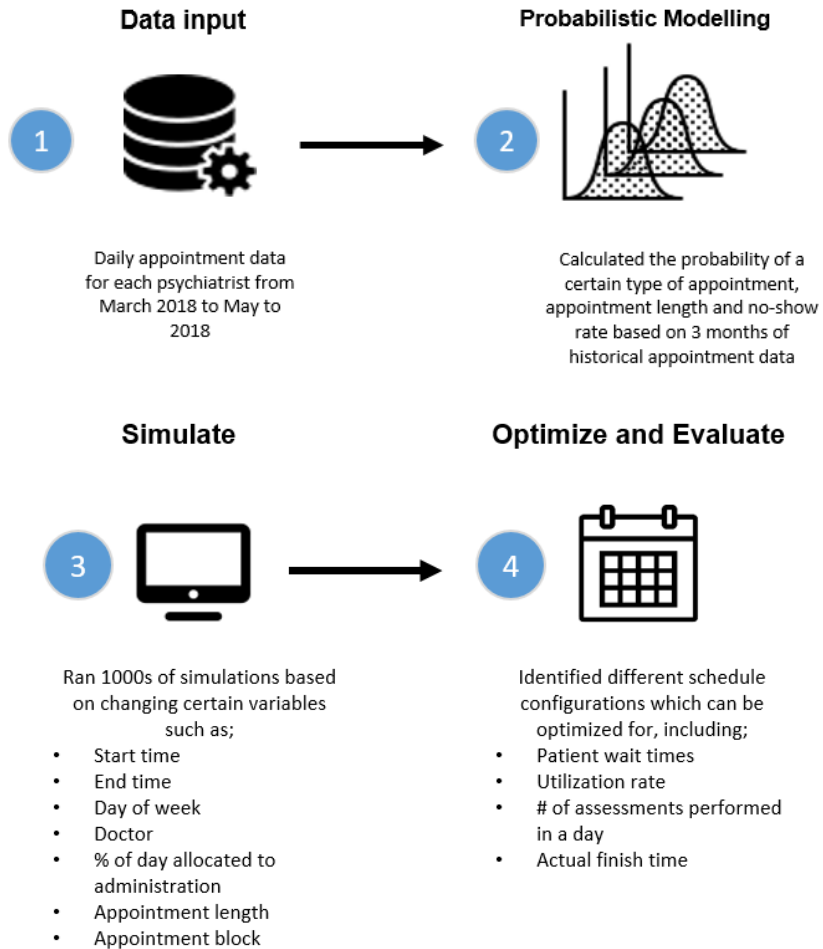
- Regional leaders tasked with productivity meeting facilitation
- Supported cascading oversight and accountability at all levels

# Activities - Data Model



# Activities - Schedule Optimization

## Simulation Model



## Schedule Enhancement

CURRENT STATE SCHEDULE		FULL ENHANCED SCHEDULE	
7:30 AM	Admin Time	7:30 AM	Admin Time
8:00 AM	Med Appointment	8:00 AM	Med Appointment
8:30 AM	Med Appointment	8:30 AM	Med Appointment
9:00 AM	Med Appointment	9:00 AM	Med Appointment
9:30 AM		9:30 AM	Med Appointment
10:00 AM		10:00 AM	Assessment Appointment
10:30 AM	Med Appointment	10:30 AM	Assessment Appointment
11:00 AM	Med Appointment	11:00 AM	Med Appointment
11:30 AM		11:30 AM	Med Appointment
12:00 PM	Lunch	12:00 PM	Lunch
12:30 PM	Med Appointment	12:30 PM	Med Appointment
1:00 PM	Med Appointment	1:00 PM	Med Appointment
1:30 PM		1:30 PM	Med Appointment
2:00 PM	Med Appointment	2:00 PM	Med Appointment
2:30 PM		2:30 PM	Med Appointment
3:00 PM	Med Appointment	3:00 PM	Med Appointment
3:30 PM		3:30 PM	Assessment Appointment
4:00 PM	Assessment Appointment	4:00 PM	Assessment Appointment
4:30 PM		4:30 PM	Assessment Appointment
5:00 PM		5:00 PM	Med Appointment
5:30 PM	Admin Time	5:30 PM	Admin Time

# Utilization Evaluation Against Standards of Care

## Standards of Care

**Overview of Case Management Standards**

A set of 11 standards have been developed to guide the delivery of case management services in [redacted]. The table below provides a description of which aspects of care will be guided by each standard.

Standard	Description
1	Client Admission to Case Management Services This standard specifies client eligibility criteria for admission to case management services.
2	Case Management Care: Planning Approach This standard specifies the approach that will be used to assess the client's case management needs.

**Introduction**  
**Project phases**

The case management implementation plan will be guided by a three phased approach.

**Behavioral Health Case Management**

**Standard 7: Service Intensity**

**STANDARD 7**  
The intensity of services that clients can expect to receive in case management services is a minimum of one to three visits per month for step-down and outpatient case management programs, and a minimum of one weekly visit for high-intensity case management programs.

**DESCRIPTION**

- Clients will be informed of the expected frequency and duration of case management appointments at the beginning of service delivery.
- Service intensity may vary depending on case management program type. Case management service interactions are expected to last a minimum of 15 minutes and up to several hours depending on client's needs. The levels and service frequency are as follows:
  - **High-intensity case management programs (e.g. IHBS, Children's FSP)** – One or more visits per week.
  - **Step-down case management programs (e.g. FSP Bridge) and standard outpatient case management** – One to three visits per month.
  - **Transition out of case management services** – One to two visits per month.
- Clients not requiring case management services with the specified intensity level should be transitioned to "step-down" services as they may no longer be suitable for case management services.

**ANTICIPATED OUTCOMES**

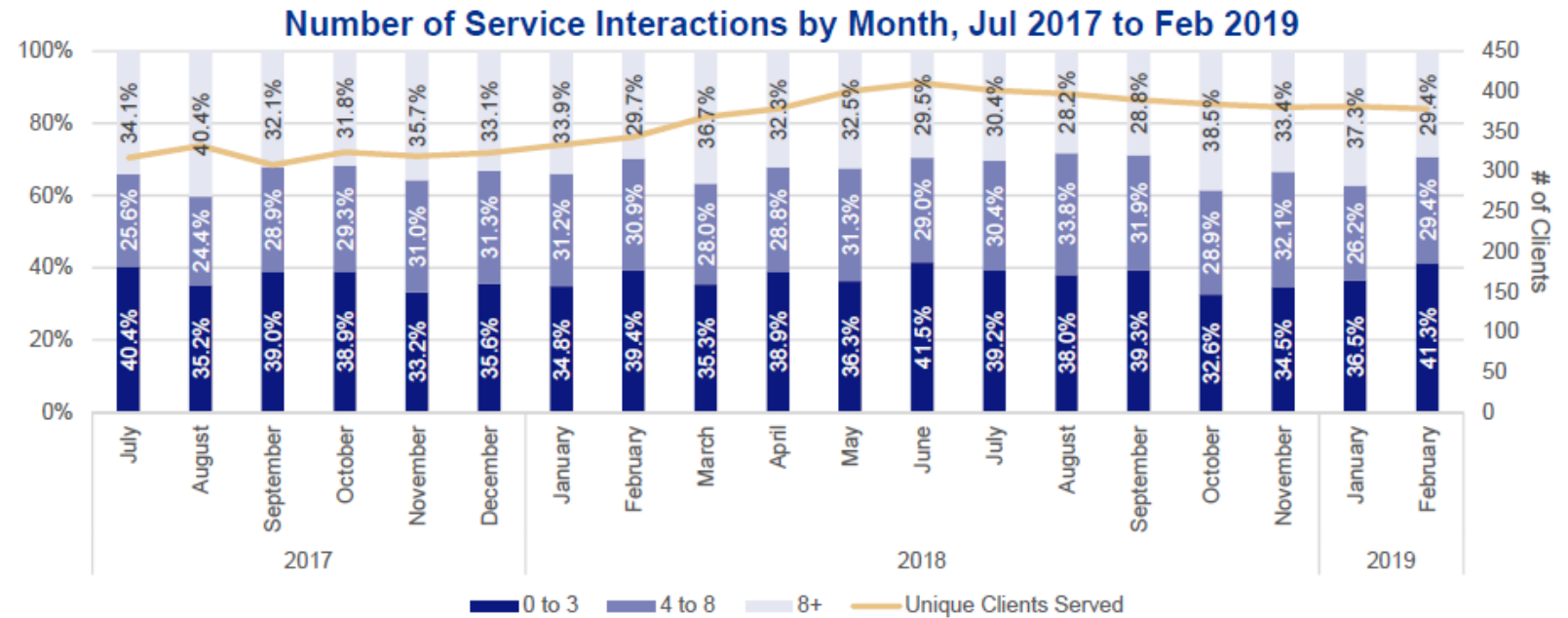
- Improved ability to track client suitability for case management services
- Improved ability to manage caseload distribution across case managers

**EVALUATION METRICS (SAMPLE)**

No.	Metric	Target
1	Percentage of clients with average monthly case management service interactions within the specified range (average calculated over a four month period).	100% for each intensity level

## Monthly Data Analysis

Average unique clients	361
Average proportion of clients with only 0-3 interactions	37.4%
Average proportion of clients with only 4-8 interactions	29.7%
Average proportion of clients with only 8+ interactions	32.9%

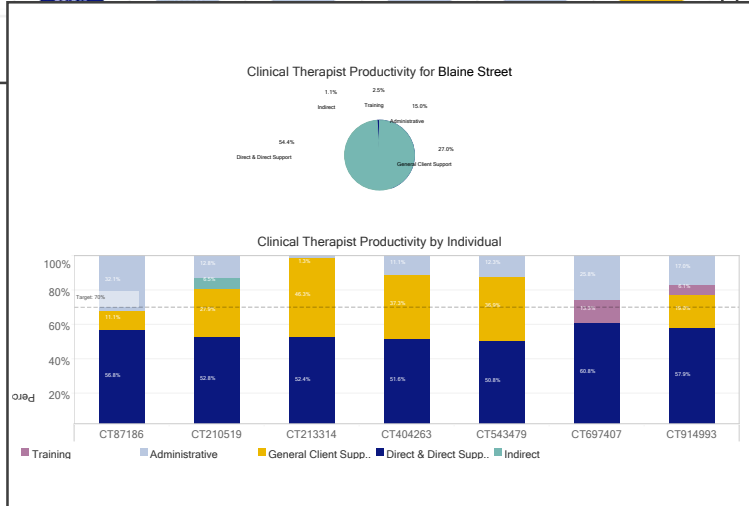
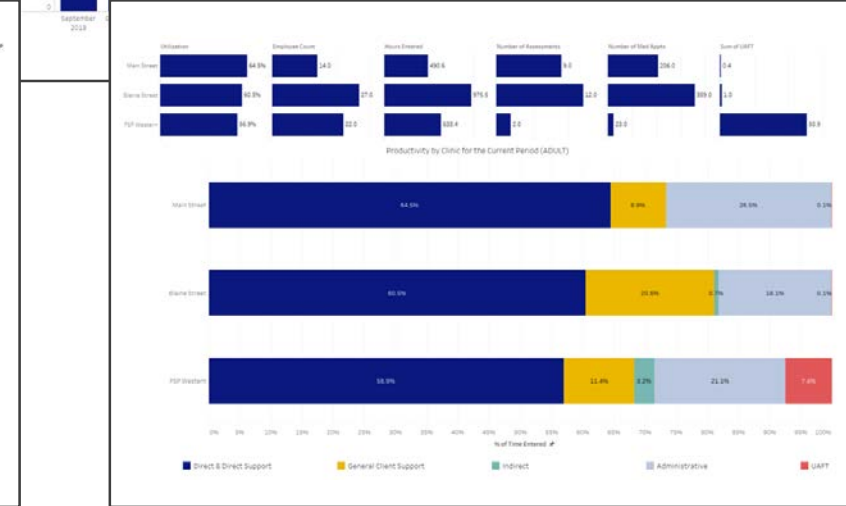
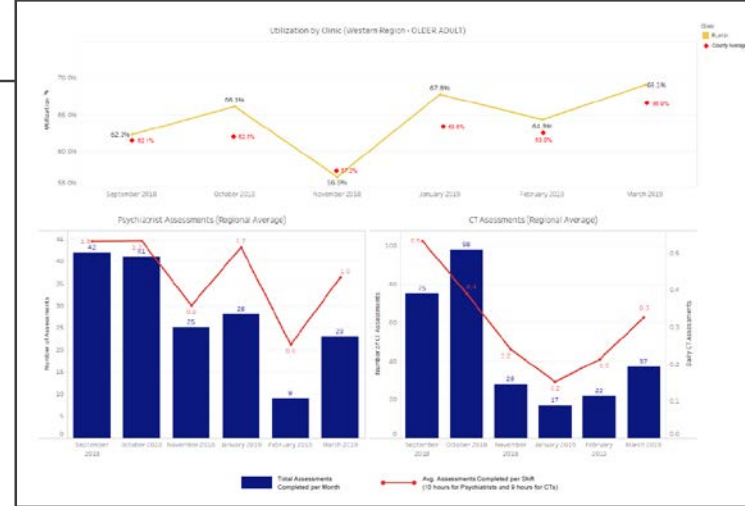
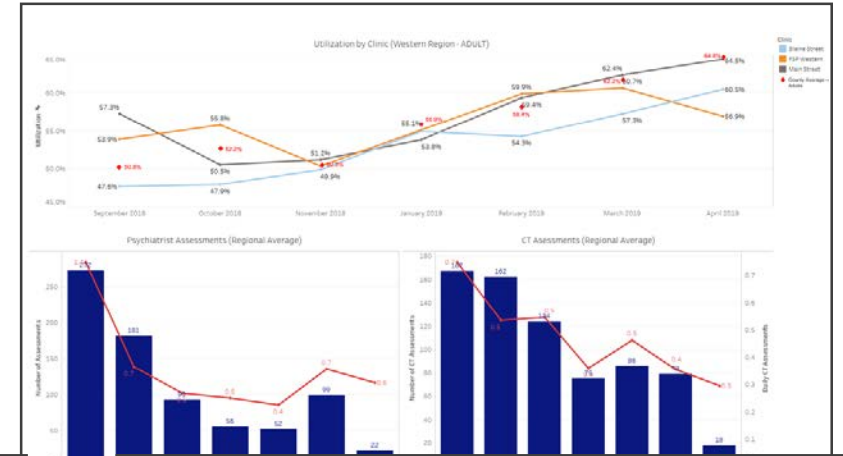
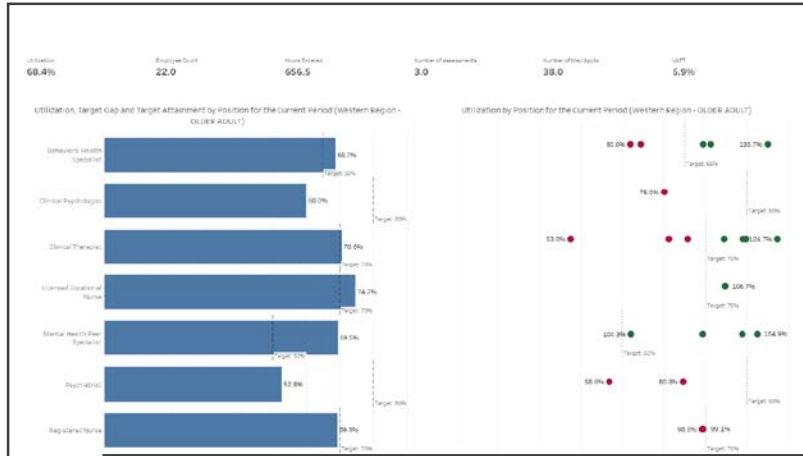
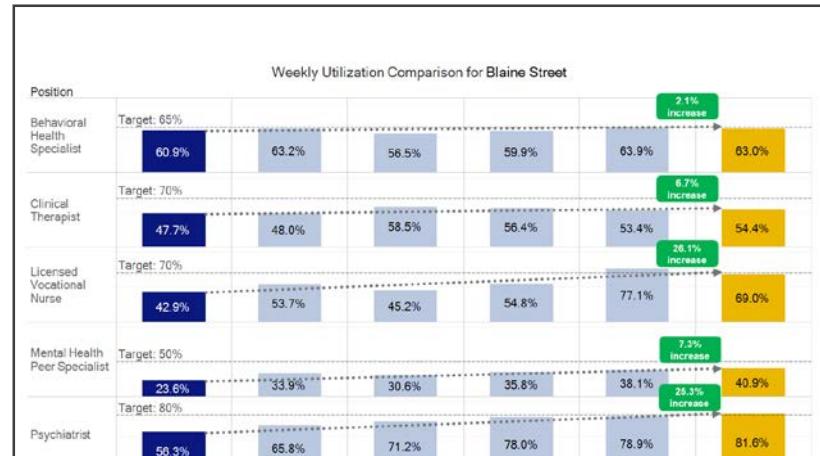


# Performance Dashboards

## Clinic Supervisor Dashboard

## Regional Directors Dashboard

## Executive Team Dashboard





# Results



# Results Summary

**Productivity  
Goal Attained**  
**95%**

**Direct Service  
Hours**  
**+ 225,000**

**Weekly Unique  
Clients**  
**+ 1,300**

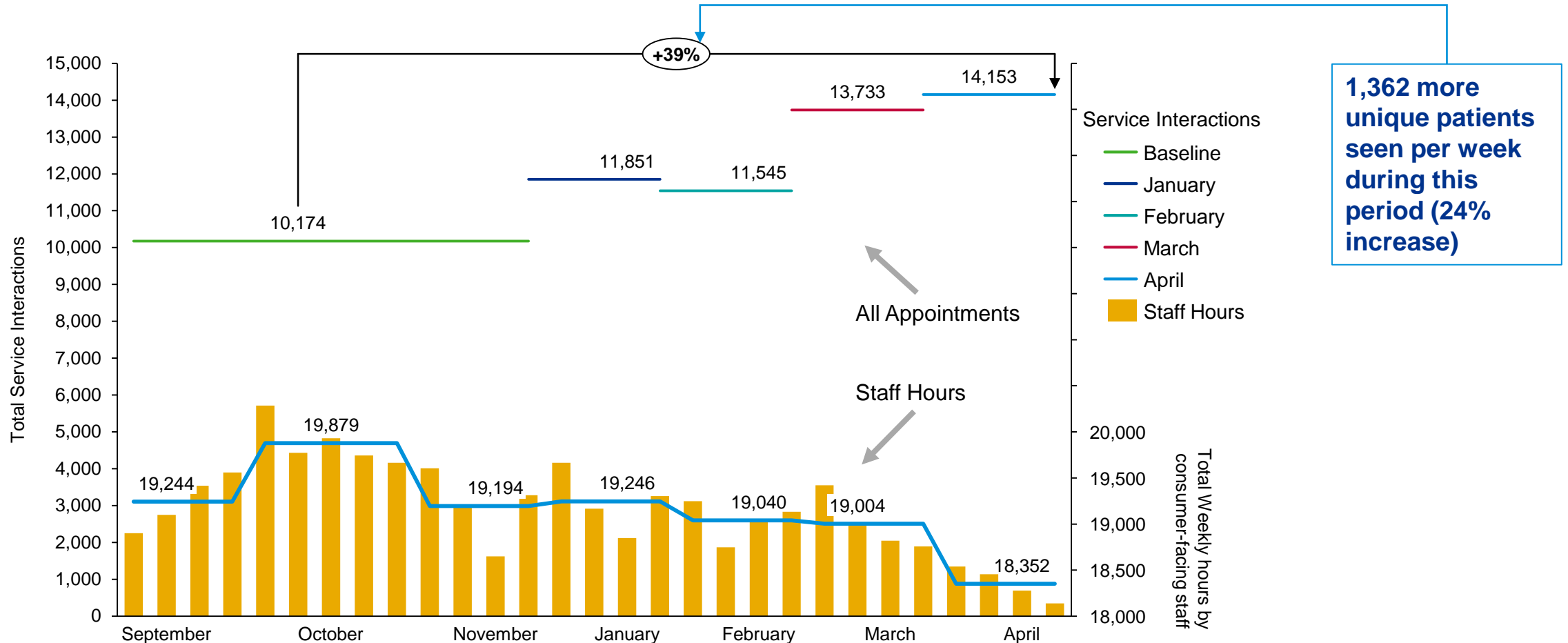
**Weekly  
Services**  
**+ 4,000**

**Daily Individual  
Therapy**  
**+79%**

**Unaccounted  
for Time**  
**-95%**

# Results - Service Interactions and Client Volumes

Weekly consumer service interactions **increased by 39%** compared to the baseline period. This is **equivalent to almost 4,000 additional service interactions per week**.

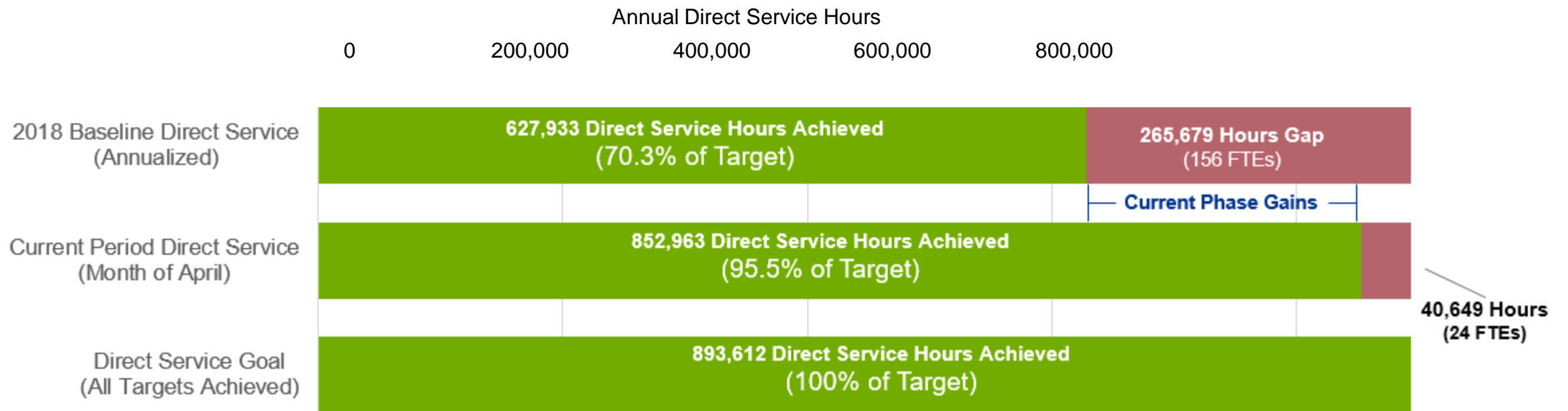


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# Results - Goal Attainment

If productivity improvement is sustained, **approximately 225,000 hours (~132 FTEs)** in additional annual direct service would be annualized.

The remaining opportunity is 40,649 additional service hours (~24 FTEs), if all staff members meet productivity goals.





Thank you