Georgia Department of Behavioral Health & Developmental Disabilities

FY2025 Community Quality Improvement Plan

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Contents

DBHDD Vision, Mission, and Commitment to Quality

Vision and Mission

The Quality Improvement Plan supports the Georgia Department of Behavioral Health and Developmental Disabilities' (DBHDD) Vision and Mission.

Vision:

> "Easy access to high-quality care that leads to a life of recovery and independence for the people we serve."

Mission:

> "Leading an accountable and effective continuum of care to support Georgians with behavioral health challenges, and intellectual and developmental disabilities in a dynamic health care environment."

Quality Improvement (QI) Plan

Characteristics of the QI Plan

The QI Plan serves as an overarching, high-level organizational framework for DBHDD's community clinical and operational quality improvement activities. The QI Plan describes a systematic approach to identify and pursue opportunities to improve services and resolve identified problems.

The QI Plan is a living document reflective of a dynamic process that is responsive to opportunities for improvement, priorities, and resources. The plan is reviewed by Senior Leadership prior to publication.

Quality Improvement Organization and Leadership

Organization

The Quality Improvement process is deployed and distributed throughout the organization, with the Office of Performance Analysis and Quality Improvement (OPAQI) serving as a hub for many QI projects, initiatives,the QI plan, and overall QI process. The OPAQI is organized as a separate office under the leadership of the director of DBHDD's Division of Strategy, Technology and Performance (STP).

Office of Performance Analysis and Quality Improvement

Vision Statement

The Office of Performance Analysis and Quality Improvement embraces the following quote by W. Edwards Deming:

> "We are here to make another world."

The OPAQI considers its primary purpose to be serving as a valuable partner with the programmatic and enterprise offices in providing analysis to support decision making and effecting changes to our agency and provider partners that ultimately benefit the people we serve.

Scope of Service

The OPAQI provides analytical, quality and process improvement support and service primarily to the Divisions of Behavioral Health and Developmental Disabilities. The programmatic divisions retain ultimate responsibility for and control over the quality improvement work occurring in their respective divisions. The goal of the OPAQI is to partner with and assist these divisions in improving the lives of the people we serve. The work of the OPAQI is structured to be:

- Aligned with the goals and priorities of DBHDD;
- Focused on making improvements that benefit the people we serve;
- Collaborative;
- Guided by established quality improvement techniques and principles; and
- Informed by best practices and peer-reviewed information.

The broad strokes of this collaborative work include:
- Strengthening and broadening of the provider network, resulting in greater effectiveness and access;
- Detecting and eliminating non-value-added effort, resulting in higher efficiency; and
- Leveraging information technology and systems to improve efficiency and facilitate reporting, which supports better informed decision making.

Leadership

Quality Improvement Leadership is provided by internal councils, DBHDD partners, and the people we serve. Quality initiatives are governed through quality councils that meet quarterly.

Behavioral Health Quality Council (BHQC)

The BHQC meets quarterly in January, April, July, and October and includes representation from the Divisions of Behavioral Health and Strategy, Technology and Performance. It is chaired by the director of the Division of Behavioral Health. This council reports on ongoing and planned QI initiatives and evaluates potential new projects.

Intellectual/Developmental Disabilities Quality Council (DDQC)

The DDQC meets quarterly in January, April, July, and October and includes representation from the Divisions of Developmental Disabilities and Strategy, Technology, and Performance. It is chaired by the director of the Division of Developmental Disabilities. This council reports on ongoing and planned QI initiatives and evaluates potential new projects.

Division Director, Strategy, Technology and Performance (STP)

The division director is a member of the senior leadership team and enjoys high visibility throughout the organization. The division director provides advanced strategic, operational, and administrative oversight to the OPAQI with the goal of maximizing the coordination between offices within STP and partnership with other offices and divisions. See figure 1 for a visual depiction of the STP structure.

Figure 1 STP Structure

```
                        Commissioner DBHDD
                                |
                        Assistant
                        Commissioner,
                        Operations
                                |
                        Division Director, STP
                                |
    Performance Analysis          Provider Relations &
    & Quality                     ASO Coordination
    Improvement

    Investigations                Incident Management
                                  & Compliance

    Medicaid
    Coordination & Health
    System Innovation
```
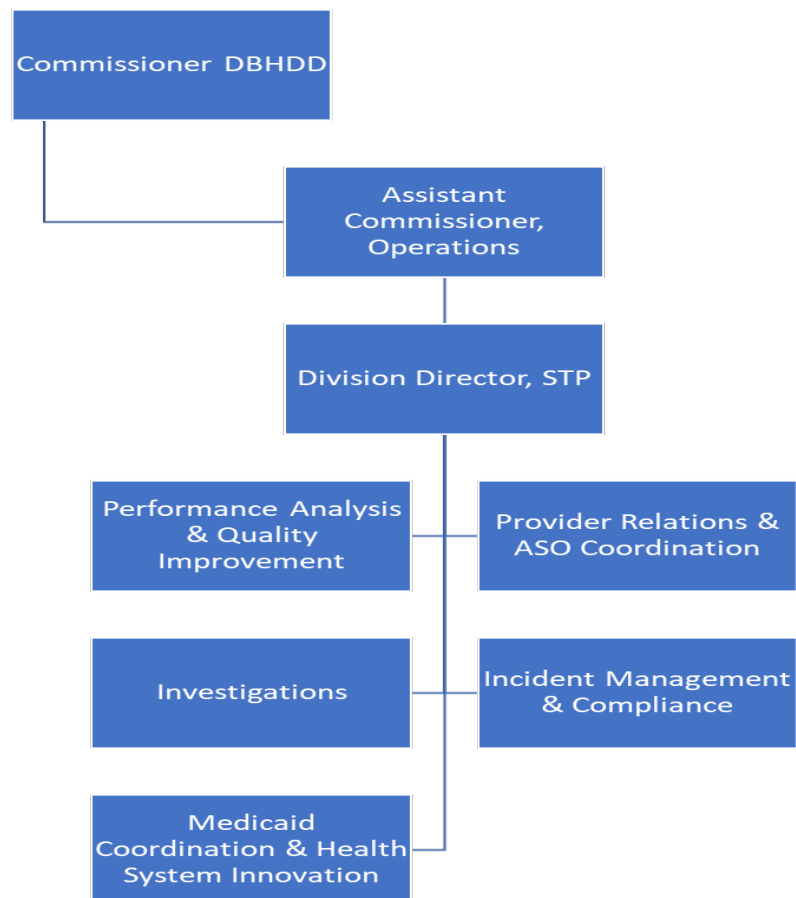
Director, OPAQI

The director occupies a senior management position with high visibility throughout the organization. The director provides functional and administrative leadership to the OPAQI team in addition to providing organizational leadership to the overall quality process.

Quality Improvement Process

Key Characteristics of the QI Process

Key characteristics of the DBHDD Community QI process include:

- Alignment with DBHDD strategic, communication, and enterprise priorities;
- Use of a systematic process with identified leadership, accountability, and dedicated resources;
- Use of data and measurable outcomes to determine progress toward relevant, evidence-based benchmarks;
- Formalized QI Plan which is reviewed by Senior Leadership and revised if needed and;
- Routine project status reporting at the programmatic quality councils.

Alignment with DBHDD Priorities

It is vitally important to DBHDD's mission that quality improvement projects are aligned with agency priorities. The following strategic objectives provide a framework to categorize these important departmental activities.

DBHDD Strategic Objectives

| Successfully fulfill the principles of ADA Settlement Extension | Influence the design and direction of the health care environment in Georgia | Manage a network of providers | Be a team of individuals who are effective, engaged, empowered and recognized |

Figure 2 DBHDD Strategic Objectives

Sources of Quality Improvement Projects

Ideas for quality improvement projects may be initiated from many sources and are then evaluated, selected, and prioritized by the relevant programmatic division(s) with assistance from the OPAQI as needed. Those deemed most vital are selected to become QI initiatives, subject to time and resource constraints. See figure 3 for a non-exhaustive listing of potential project sources.
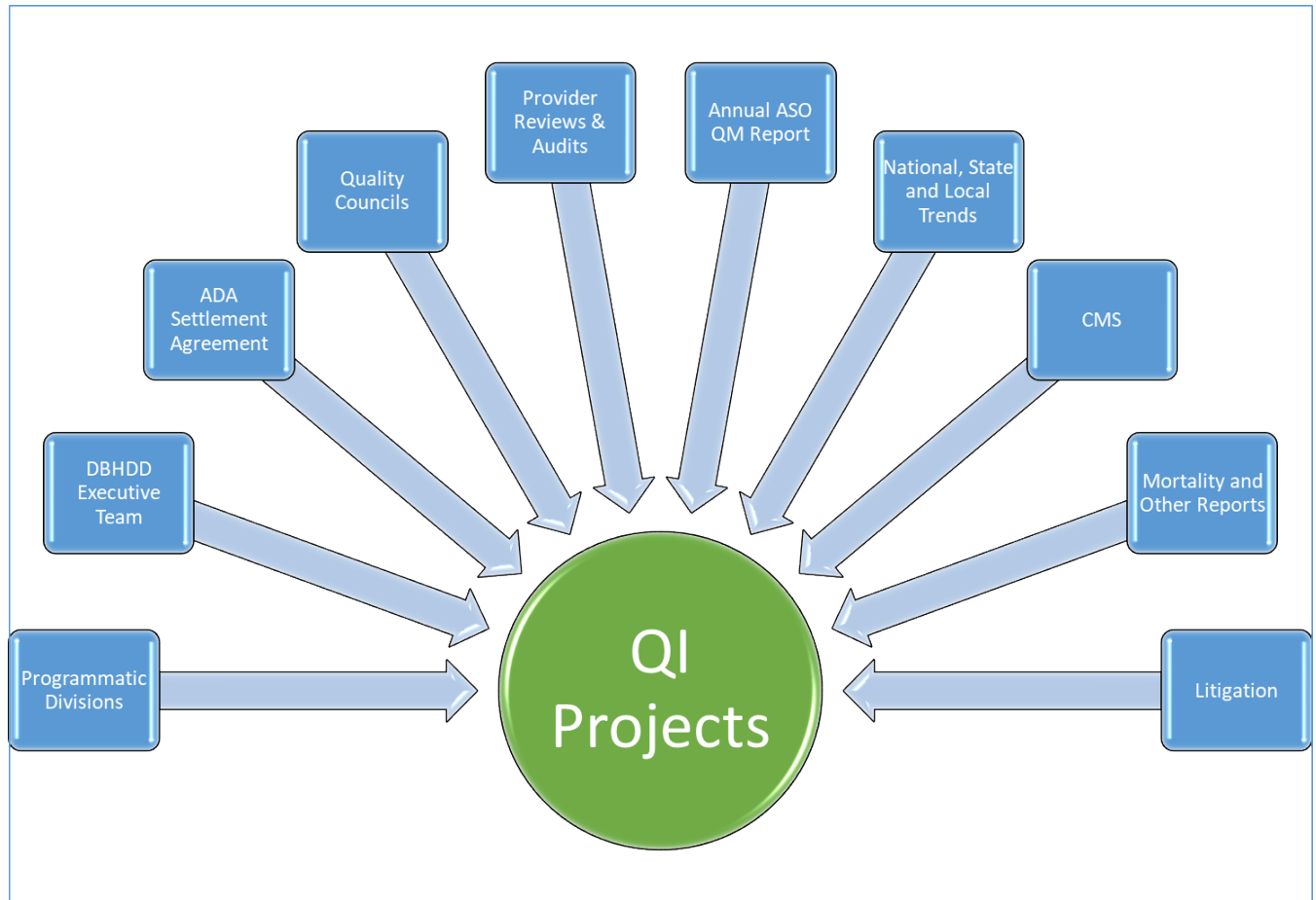
Figure 3 Sources of QI Projects

Once the performance of a selected process has been measured, assessed, and analyzed, the information gathered is used to identify possible quality improvement initiatives. The decision on whether to undertake the initiative is based on DBHDD priorities and resource availability and is generally made by the programmatic division either directly via the division director, or through divisional quality councils. Please see figure 4 below for a visual depiction of this process.

How does a Potential QI opportunity become a project?

External to Process

Potential Quality Improvement Opportunity is identified and presented to Programmatic Leadership

Programmatic Leadership

Does Programmatic Leadership recommend moving forward? —No→ End

Yes, to Quality Council for consideration

Programmatic QI Councils

Yes, to QI Work Group for action

Does QI Council recommend moving forward? —No→ End

Yes

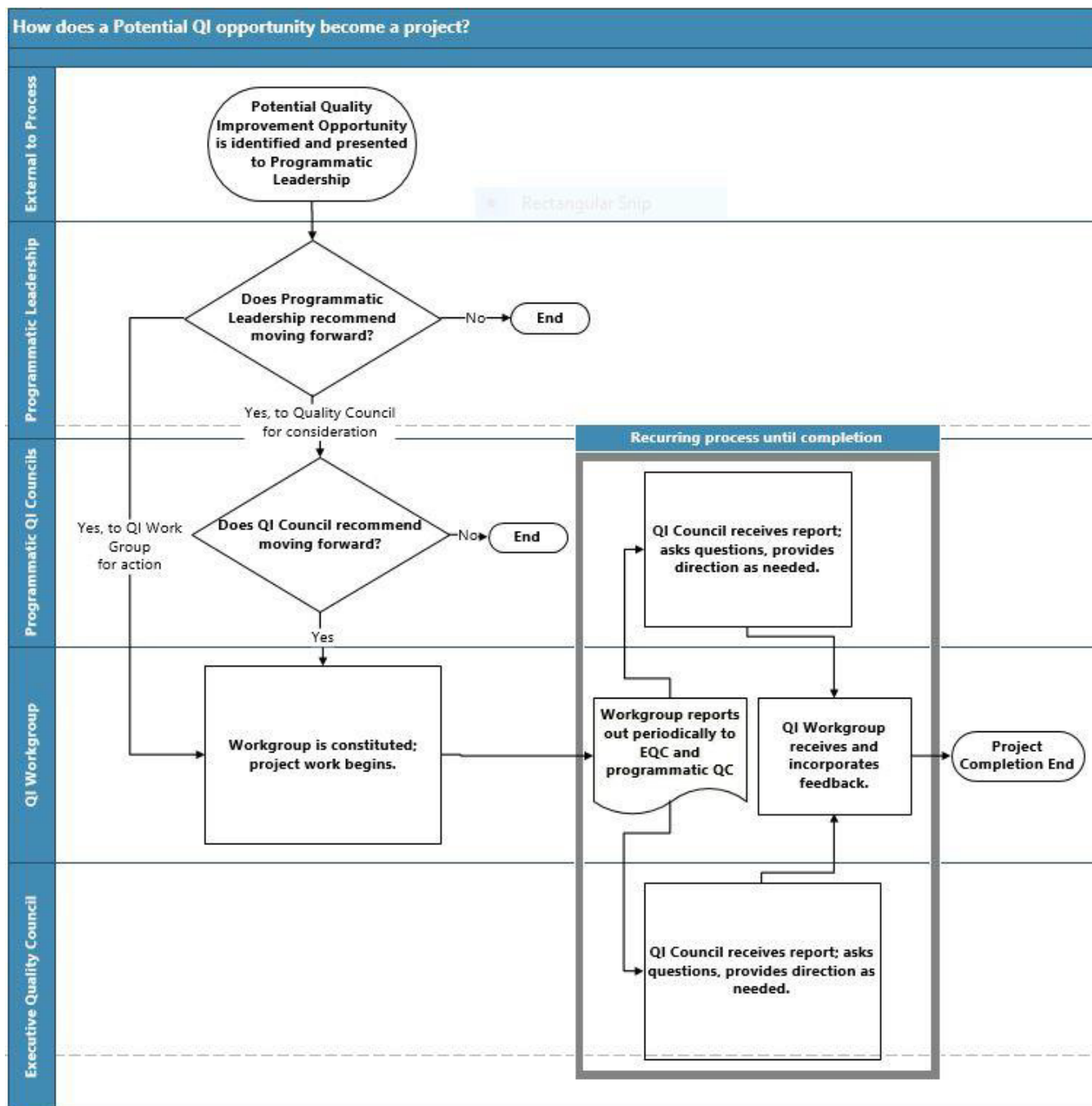**Recurring process until completion**

QI Council receives report; asks questions, provides direction as needed.

QI Workgroup

Workgroup is constituted; project work begins.

Workgroup reports out periodically to EQC and programmatic QC

QI Workgroup receives and incorporates feedback.

Project Completion End

Executive Quality Council

QI Council receives report; asks questions, provides direction as needed.

Figure 4 Decision to Accept a Project

National, State, and Local Trends

The OPAQI has two distinct, yet interrelated bodies of work – the analysis work which supports decision making, and the quality improvement work which supports improvements to DBHDD and its providers. Part of the analysis work of this office includes using DBHDD and external data to drive performance improvement initiatives and demonstrate outcomes of these initiatives. This is achieved through a variety of activities:

- Identification, development, testing, and analysis of performance metrics
- Scientific literature review/research necessary to identify research hypotheses, study design, data collection, and analytic models
- Outcomes analysis to determine impact of a program, modification, or intervention
- Provision of analytic reports and results using understandable language while retaining scientific foundation
- Consultation on developing impactful, data-driven studies

Georgia Collaborative ASO (ASO)

The Georgia Collaborative Administrative Services Organization (ASO) is an external partner of DBHDD; Carelon is the primary contractor and maintains sub-contracts with Behavioral Health Link for GCAL services and with Qlarant for IDD-specific quality services. Among the many services the ASO provides on behalf of DBHDD are quality improvement services. This important function generally uses a hybrid on-site/remote review of providers and subsequent quality improvement activities at both the system and provider level.

Under the direction of the OPAQI Director, the Quality Improvement arm of the ASO is charged with:

- Assessing and reviewing services rendered to individuals across the state;
- Providing a preliminary and final scored report to both provider agencies and DBHDD of summarized findings;
- Providing technical assistance and training to the providers, based on the review and findings; and
- Analyzing, tracking, and trending the data collected in these reviews to make recommendations to providers, stakeholders and DHBDD regarding areas that are doing well or those that could benefit from some type of performance improvement initiative.

Quality Improvement Initiatives

Overview

In general, Quality Improvement initiatives should align with at least one of the priorities noted in Figure 2 and many QI projects address more than one goal or target area. Quality improvement processes may also take several forms. The OPAQI noted areas where we are partnering to create changes or provide a direct intervention to spur improvement; we describe these as **partnered initiatives**. In other cases, we may be using our findings to **improve processes** in incremental steps. Finally, we may be pursuing additional research or knowledge related to a subject matter to **advance sophistication**. A non-exhaustive list of completed, current, and planned initiatives follow, attached to the priority target with which they are most closely associated.

Completed Initiatives

Completed initiatives are grouped according to the strategic objective with which they are most closely associated, although a single initiative may address more than one objective. Those initiatives denoted with an asterisk (*) have been actively supported by the OPAQI.

Initiatives that Addressed "Successfully Fulfill the Principles of the ADA Settlement Agreement."

These ADA Settlement Agreement aligned initiatives intended to deliver the necessary supports and services needed for individuals throughout the state of Georgia.

Several Office of Supportive Housing (OSH) project initiatives' operational efforts were fulfilled that provided continued support to homeless individuals in need of housing stability access as detailed below:

- **Office of Supportive Housing (OSH) "Results Oriented Program Evaluation" (ROPE) Implementation Process*:** The ROPE team has transitioned to a Quarterly cadence:
    - Data monitoring and evaluating supportive housing Key Performance Indicator (KPI) such as (i.e. Number of GHVP Referrals, Average Active GHVP Recipients, and other indicators).
    - Subject Matter Experts (SME) will also continue discussing and presenting a trend analysis report for OSH internal use.
- **The OSH/Housing Authority of Dekalb County (HADC)* alliance:** This relationship has resulted in setting aside 60 Housing Choice Vouchers for Georgia Housing Voucher (GHV) recipients. As part of the project, the Office of Performance Analysis and Quality Improvement (OPAQI) developed a process map that detailed the referral and application process, aligning responsibility and accountability between the OSH and HADC.

- **DOJ - Jail/Georgia Department of Corrections (GDC) Re-entry Housing Needs Flowchart*:** A process map was created that showed the steps for individuals transitioning from Jail and GDC Re-Entry to the Georgia Housing Voucher Program (GHVP). The GDC and county jails were able to obtain a deeper understanding of the re-entry process and their role in it
.
- **SSI/SSDI Outreach, Access, and Recovery (SOAR) program transitioned to Office of Supportive Housing (OSH)*:** The SOAR program was transitioned to OSH to support alignment with supportive housing service delivery. **Establishment of SOAR Statewide Steering Committee:** The committee comprised of the following: Substance Abuse and Mental Health Services Administration (SAMHSA), Social Security Administration (SSA), and the Georgia Department of Labor Disability Adjudication Services (GDLDAS). The steering committee was instrumental in creating the guidelines to follow when determining eligibility of individuals who pursue SSI/SSDI through the SOAR program.

- **OSH/Georgia Department of Public Health (DPH) Birth Certificate Partnership*:** This initiative has allowed DBHDD-approved provider agencies to obtain birth certificates on behalf of homeless individuals applying for SSI/SSDI assistance.

- **OSH Behavioral Health Assessment (BHA) Trainings*:** DBHDD BHA policy and procedural changes went into effect in April 2024. The OSH and GA/ASO Collaborative trainings were successfully presented to providers and GHVP staff in June 2024. The trainings focused on authorization and effective billing practices aligned with the new policy.

- **The Region 2 Hospital Transition Project*:** Providers were required to connect with individuals early in the hospital stay to identify their transitional needs prior to discharge. This approach has facilitated a seamless transition for individuals returning into the community.

- **The OSH GHVP-5 Protocol Development Project*:** This project was formed to establish and document a consistent process for updating GHVP-5 Annual Rental Housing Payment Information. The calculations were based on established rental rates pulled from the Department of Community Affairs (DCA) and Local Housing Authorities (LHA).

- The OSH in collaboration with the Office of Performance Analysis and Quality Improvement (OPAQI), created a **Georgia Housing Voucher Program (GHVP) Discharge process map*.** The process map illustrated the steps taken when individuals are discharged from the program. DBHDD Staff, providers, and other stakeholders used the flowchart tool to better understand the GHVP discharge process and their role in the process.

- **GHVP Housing Support Program (HSP) Monitoring Initiative:** The initiative showed a need to improve documentation standards. For that reason, the monitoring cadence increased from an annual to a quarterly basis. Work is ongoing to accomplish the following:
  - Increase amount of documentation entries in the Electronic Medical Records (EMR's).
  - Higher quality of content in documentation presented.
  - Greater levels of compliance and satisfaction amongst the providers.

Initiatives that addressed "Influence the Design and Direction of the Health Care Environment in Georgia."

Monthly Mobile Crisis Response Services (MCRS) Reports for DBHDD Commissioner Tanner*: The report provided DBHDD Commissioner Tanner with pertinent MCRS data that supported him in addressing DBHDD leadership and others. The information shared included Historical Use and Outcomes of MCRS Funding, impact of FY24 funding additions, and future funding opportunities.

Initiatives that addressed "Manage a Network of Providers"

The following initiatives supported the state's efforts to Manage a Network of Providers in Georgia:

Partner with Sister Agencies to Address Autism: Work with sister agencies to expand the range of services available to children with autism payable by Medicaid. The ASD CSU continues to accept admissions, but due to workforce challenges are not accepting to full capacity. DBHDD is monitoring weekly the recruitment and retention plans for staff with the operating entity. The CSB Association continued to submit invoices on its ASD development contract towards final close-out for June 30, 2022.

Law Enforcement (LE) collaboration: DBHDD has been working on creating a mechanism for LE to connect individuals to DBHDD services statewide during crisis/potential crisis encounter(s).

Below are completed collaborative DBHDD/LE projects:
- **Pilot Program County-Based Time/Mileage Study for Sheriffs*:** The Transport Pilot Study was a joint effort between DBHDD and the Georgia Sheriffs' Association (GSA). A process map was developed that depicted each step of the Transport Process. The transport data identified improvement opportunities such as enhanced collaboration with GCAL and improved wait times for Deputies at the ERF. The Transport Study Report Findings were shared with the Georgia Sheriffs' Association.
- **The Sheriffs Educational Material Project*:** This project accomplished three objectives:
  - Developed educational material, with a simplified list of acronyms that guided Sheriffs through the process of accessing DBHDD's services.
  - Equipped Sheriffs with the understanding of how to connect individuals to DBHDD services.
  - Provided Sheriff's and other Law Enforcement/Judicial partners with a (ONE PAGER) indicating who is responsible for different services (DBHDD Departments, DBHDD Directors, and Crisis/GCAL), to improve their response time to individuals.
  -

The Certified Community Behavioral Health Clinics (CCBHC) initiatives*: The CCBHC initiatives were a multi-year project development model with the goal of having selected Community Service Boards (CSBs) achieve CCBHC status. Here are examples of the CSBs' completed projects work moving towards the goal of being a CCBHC:
- The creation of the **CCBHC MTM Tool*** was used by CSB candidates to support them in becoming CCBHC Certified. The tool was also used by DBHDD Certification Specialists to validate the CSB candidate's application information with the CCBHC's certification criteria requirements.
- CCBHC **Community Needs Assessment (CNA) Tool*:** CSB candidates conducted and submitted a copy of their CNA as a requirement of their CCBHC's certification process. Tools submitted were used to support candidates' identification of their needs which includes supporting their financial viability as a CCBHC.

There are several projects specifically related to **BHCCs/CSUs** that have addressed improvements

in management operations and efficiencies. Details of completed project work are as follows:

- The Office of Crisis Coordination built a **BHCC/CSU Provider Toolkit resource for** BHCC, CSU, and Regional Field Office (RFO) Staff to implement into their programs (i.e. Intake and Evaluation, Temporary Observation, Disaster Preparation, and other programs. For BHCC/CSU providers, the Toolkit provided both on-demand technical assistance and the alignment of service expectations throughout the State of GA's Crisis system. For RFO Staff the Toolkit can be used when discussing programmatic functionality and monitoring of service delivery.
- **BHCC/CSU New Construction Toolkit:** The toolkit was developed for providers who were building a new BHCC or converting a CSU to BHCC. The purpose of the toolkit was to provide guidance on construction, facility safety, project timelines, DBHDD expectations, and programmatic information. This Toolkit is a living document that will be updated (as needed) to reflect changes in best practices and/or DBHDD regulations in the future.

The **2023 Apex School Survey*** was developed by the Office of Children, Young Adults and Families (CYAF) and OPAQI. The survey findings showed that the Apex program provided early detection of child and youth needs and strengthened coordination between community-based mental health providers and schools throughout Georgia.

Emergency Receiving Facilities (ERF) Statewide Data Report*: ERFs were required to submit to DBHDD all 1013 and 2013 certificates received during calendar year 2023. DBHDD compiled the data gathered and created the ERF statewide report. The finalized report was sent to the Legislature and later presented to the General Assembly, the Governor, the Lieutenant Governor, and the Speaker of the House of Representatives.

Initiatives that Addressed "Be a Team of Individuals who are Effective, Engaged, Empowered, and Recognized."

DBHDD Office of Human Resources (HR) completed a project to improve the effectiveness and engagement of the DBHDD's workforce detailed as followed:

The Job Classification and Career Path project: DBHDD successfully implemented several recommendations from the Department of Administrative Services (DOAS) and external consultants. This resulted in increased workforce market competitiveness and career paths for critical positions being impacted by recruitment, retention, and compensation.

Adverse Action Process Map* OPAQI, the Division of IDD, and Offices of General Counsel partnered to develop an Adverse Action (AA) process map to accurately and thoroughly capture each step of the AA process. All pieces of the AA Process Map were approved by DD subject matter experts and members of the legal team. These process maps will be used to train staff on how to properly manage AA in a standardized manner.

Ongoing and Planned Initiatives

Ongoing initiatives are grouped according to the strategic objective with which they are most closely associated, although a single initiative may address more than one objective. Those initiatives denoted with an asterisk (*) are being actively supported by the OPAQI.

Initiatives that Address "Successfully Fulfill the Principles of ADA Settlement Agreement"

DBHDD prepares an **Annual Mortality Report*:** which summarizes, analyzes, and trends consumer deaths occurring in the previous calendar year. Click here for copies of previous Mortality Reports. These reports have primary source data for identifying and creating actionable intelligence useful in designing and performing QI projects improving the health and safety of the individuals we serve. During this year, findings from the mortality report led to four areas of special focus. These four areas were selected based upon their importance in positively impacting people served. They are:

- Increasing sophistication in use of the HRST
- Choking and aspiration risk for the IDD population
- Aggression – Self
- Aggression toward others and property

DBHDD will continue to study the impact of these responses and build upon them to further refine and enhance positive impacts for the people we serve.

DBHDD compiles a **Support Coordination Performance Report*:** annually to evaluate the performance of individual support coordinators and agencies. This report offers insight for statewide management of performance and quality of support coordination service provision. In addition, this report acts as a guide for targeting opportunities for quality improvement. Click here for copies of the most recent and previous Support Coordination Performance Reports.

Providing housing supports for individuals with severe and persistent mental illness is of major importance. The following Office of Supportive Housing (OSH) project initiatives represent the enduring efforts made in the pursuit of supporting homeless individuals seeking housing stability in an efficient and impactful manner:

- **Development of the Georgia Housing Voucher Program (GHVP) Manual:** The OSH continues its partnership with Pathways Housing First Institute to produce a program manual for the GHVP. The manual will include pertinent information on tools and techniques to help guide providers, individuals, and landlords while navigating through the GHVP process.
- **GHVP Case Management Tool Implementation:** The OSH is determining the feasibility of using the Microsoft Dynamics System tool as the state's case management database. The goal is to improve GHVP communication efficiencies between DBHDD Central Office, Regional

Offices, and Community Provider Teams.

- **GHVP Transition Initiative:** The OSH is partnering with the Department of Community Affairs (DCA) to transition stable households from the GHVP to the federally funded Housing Choice Voucher (HCV) Program. The goal is to free up Georgia state funds for those households who do not qualify for HCV funds.

- **Office of Supportive Housing (OSH) Effectiveness Research*:** The OSH is comparing the impact on individuals receiving housing versus those not receiving housing during Calendar Year 2022. Additional research will be performed to determine if the housed individuals had any improvement in other support service metrics such as crisis intervention, residential detoxification and community inpatient services.

- **Harm Reduction Training:** The Office of Supportive Housing is conducting a series of harm reduction trainings for all Housing Support Program providers. These trainings include harm reduction, substance use, and readiness for overdose-reversing medication techniques.

- **Fidelity Monitoring Program Adjustments Project:** The OSH is developing a Fidelity Monitoring Program Charter and Standard Operating Procedures process. The fidelity monitoring data will be used to measure the appropriate level of efficacy and integrity of the provider housing fidelity program.

- **Community Coordination Housing Assessment Project*:** The OSH interacts with state and local agencies to identify common resources for individuals eligible for supportive housing. Dialogue to build a unified decision engine application that directs qualified individuals to appropriate supportive housing resources is ongoing.

- **Projects for Assistance in Transition from Homelessness (PATH) Dashboard* project:** The OSH is developing a PATH dashboard using Power BI software. The implementation process will route federal Housing Management Information System (HMIS) data to DBHDD's data warehouse and populate the PATH Dashboard. The creation of the PATH dashboard will simplify and provide easy access to PATH data for a more streamlined decision-making process.

- **Office of Supportive Housing External Research*:** There are ongoing projects focusing on the homeless population as it relates to the housing voucher system. External research on Developmental Disability data linkages, Mobile Crisis services, Family Treatment Courts, and Predicting Poverty and Inequality is proceeding. The Research on Hospital Treatment Utilization for individuals who received services before or after incarceration is still ongoing.

Bed Board Revision project: This project focuses on improving data collection efficiency and accuracy that supports Bed Board Reporting throughout the Provider Network. This revision is expected to continue through the end of calendar year 2024. **The Bed Board After Hours Activity* project:** An examination of the Bed Board "business hours versus afterhours" activity for Behavioral Health Crisis Centers (BHCCs), Crisis Stabilization Units (CSUs), and State Contracted Beds (SCBs) is in progress. Further analysis will be made to determine if afterhours volume presents Bed Board management challenges.

Assertive Community Treatment (ACT) Revisioning project*: The Office of Adult Mental Health (AMH), the Office of Data Analytics (ODA), and OPAQI are developing a dashboard that presents ACT data graphically. The goal is to establish a user-friendly and effective dashboard for evaluating ACT provider performance. The current iteration of the dashboard is under review by Subject Matter Experts (SME).

Initiatives that Address "Influence the Design and Direction of the Health Care Environment in Georgia."

Mobile Crisis Request for Proposal (RFP) Projections Support*: OPAQI developed a modeling tool for Behavioral Health (BH) that RFP workgroups can use to project mobile crisis dispatch volume and provider revenue. The BH RFP workgroups are using the tool in advance of FY26 budget requests and RFP release to project and later evaluate incoming bids from mobile crisis providers.

The Department of Behavioral Health and Developmental Disabilities (DBHDD) and Criminal Justice Coordinating Council (CJCC) Project Initiative*
CJCC researchers aim to use DBHDD data to identify individuals with Severe and Persistent Mental Illness (SPMI) who used DBHDD services either before or after incarceration. Using this method, researchers can identify individuals with SPMI across counties, regardless of felony status. Work is ongoing to discover the following:
- o Identify the percentage of overlap that meets the definition of having "SPMI" as defined in DBHDD policy.
- o Determine the overlap between county jail populations and individuals with SPMI receiving services from DBHDD providers.
- o Ascertain the percentage of those individuals with SPMI who are consistent with DBHDD's recidivism's metrics, the criminal justice system, and both.

Initiatives that Address "Manage a Network of Providers."

The Certified Community Behavioral Health Clinics (CCBHC) project*: This is a multi-year project with the goal of having selected Community Service Boards (CSBs) achieve Certified Community Behavioral Health Clinic (CCBHC) status. A total of four CSBs are working towards finalizing their CCBHC certification. The DBHDD/CCBHC project team is evaluating the CSBs' financial systems, DBHDD policies, and other reporting capabilities. **CCBHC PMR+ Tool*:** The CCBHC project team is evaluating and testing the tool to ensure it contains the required federal and DBHDD guidelines for meeting CCBHC certification criteria.

Office of Deaf Services (ODS)/Office of Supportive Housing (OSH) Collaborative Project*: The OPAQI is evaluating the efficiency and accuracy of information the ODS program provides for individuals who are referred to the Georgia Housing Voucher Program (GHVP). OPAQI will begin assessing processes relating to Intake of Deaf or Hard of Hearing Individuals, linkage to GHVP,

and Integrity of Registration Data entered in the Deaf Management Information System (DMIS).

The Office of Adult Mental Health (AMH)/Department of Community Supervision (DCS) Partnership*: The Mental Health Officer pilot study continues to identify best approaches to coordinate and provide treatment services for the parolee population. The University of North Carolina (UNC) is also a partner in this work and is deploying surveys to Community Service Board (CSB) staff and Department of Community Supervision (DCS) staff regarding the understanding of each other's role, collaboration and services. Surveys are administered via Qualtrics and housed at UNC to ensure confidentiality.

DBHDD is in the process of refining the **Intellectual and Developmental Disability Key Performance Indicators (KPI)*:** During this project, Subject Matter Experts (SMEs) from IDD and OPAQI collaborated during a series of meetings to review current and potential data sources and discuss opportunities for more concise measurements of performance. The performance domains reviewed include health and safety, staff qualifications, and administration. KPIs have been developed for IDD programmatic areas. DBHDD will begin reporting the KPI Data to IDD leadership in December of 2024.

DBHDD in conjunction with the Department of Community Health (DCH) is working to enhance compliance with the **HCBS Settings Rule**. DBHDD is in the process of reviewing current tools that are used to collect information related to HCBS services. In addition, DBHDD and DCH are collecting data to measure provider compliance. Quality improvement initiatives will continue to be developed based on findings from data collected.

DBHDD and ASO/Georgia Collaborative Joint Trainings*: Subject matter experts from BH and DD partner with the Georgia Collaborative in developing content for trainings presented throughout fiscal year 2025.
- Examples of Behavioral Health training topics include, New BH Provider Training Part V, Preparing for your Behavioral Health Quality Review, FY25 BHQR and CSUQR Quality Review Process, and Housing Supports Provider trainings.
- Examples of Developmental Disabilities training topics include Community Engagement and Documentation, Putting Person-Centered Practices into Action, Promoting Independence, and Building Inclusive Community Diversity.

The Office of Crisis Coordination's (OCC) implementation of the 988 National Suicide Prevention (NSP) and Mental Health Crisis (MHC) System*: continues to make significant progress. Individuals can access services by calling 988 or GCAL to receive telephonic intervention or connection to community resources such as Mobile Crisis, 911/EMS, and outpatient community providers as appropriate. 988 design work continues throughout many aspects of the system such as implementation planning, communications, CSU/BHCC construction resource guide, and mobile crisis telehealth. and data collection review and analysis. **The 988 data governance initiative*:** Work groups are tracking and monitoring 988 data relating

to activity during FY2024. At the 2-year anniversary mark, the objective is to revise the 988 Data Inventory and place more emphasis on identifying Key Performance Indicators and related Outcomes.

The **2024 Apex School Survey* initiative:** Deployment of the Apex School Satisfaction Survey has commenced. The survey collects data on the schools' level of awareness and satisfaction with the Apex Schools Program's providers. The survey results will be shared with the Office of Children, Young Adults and Families (CYAF) leadership. The 2024 data will be compared and contrasted with 2023 data and used to highlight improvements achieved and identify additional improvement opportunities.

Initiatives that Address "Be a Team of Individuals who are Effective, Engaged, Empowered, and Recognized"

The DBHDD Office of Human Resources (HR) is actively working to improve the effectiveness and engagement of the department's workforce. The **Kronos Workforce Scheduler project** is successfully implemented at Georgia Regional Hospital Atlanta, while Georgia Regional Hospital Savannah is still in the final stages of execution. The expected completion date of all 5 hospitals is set for the end of calendar year 2024.

Adult Mental Health (AMH) Judicial Services Database*: The Office of AMH with support from OPAQI collaborated to design a judicial services process map. The Office of Information Technology (OIT) is using the flowchart to develop an AMH Judicial services database. Testing of the database is forthcoming.

As of July 15, 2022, DCH and DBHDD have entered a new **Comprehensive Support Waiver*:** (COMP) cycle. In preparation for the cycle, OPAQI and IDD are collaborating to identify subject matter experts to assist with developing operational definitions and data collection strategies for performance measures written into the waiver. The strengthened operational definitions will assist with the development and implementation of quality improvement initiatives.

IDD CMS Waiver Assurances*: - In collaboration with DCH, DBHDD conducts routine analysis and review of the CMS Waiver Assurances. Where opportunity for improvement is identified, DBHDD and DCH collaborate to improve processes, data collection, and outcomes. OPAQI and IDD are making changes to the NOW and COMP performance measures based on waiver amendments to define the data collection and aggregation agencies.

ISP Revision & QI Directives Project: - The redesign of support coordination is multifaceted and includes several quality initiatives. There are remaining challenges around data saving in all areas of the ISP. These challenges impede the ability to develop quality initiatives as we are still working on functionality. Additional training for Support Coordination Agencies began in April 2021 to address nuances of service delivery descriptions for waiver participants. Training continues every

other week on issues of service delivery and functionality of the new system, IDD Connects. The Individual Service Plan Quality Assurance (ISP QA) Checklist will be reviewed quarterly as we move ahead to assess and provide quality improvement guidance for the Support Coordination Agencies.

Planning List Administrator (PLA) Process Map*: - OPAQI and IDD leadership are developing Planning List Administrator process maps to standardize PLA functions across DBHDD's six regions. Regional and IDD leadership and OPAQI continue to meet to map out PLA processes as they are finalized by SMEs. In addition, these offices are collaborating to develop an **Intake & Evaluation (I&E) Process Map** The first draft version of the process was reviewed by SMEs. A future state version of the Online and Paper-Based processes will be presented to I&E staff to gather additional feedback and incorporate changes into the process map.

State Opioid Response (SOR)/Survivors of Suicide (SOS) Statewide Initiative: SOS is a strength based upstream approach for youth suicide prevention that aims to identify high needs counties and offer implementation of SOS programs in schools throughout Georgia. The intended outcomes of this initiative are:
- Increase the number of Certified SOS Trainers in Georgia.
- Develop processes to implement SOS programs across the State.
- Increase the number of schools using SOS.
- Reduce youth Substance Abuse and Suicide in middle and high schools and improve school climate at those schools.
- Enhance the partnership between DBHDD and DOE through collaboration and effective communication.

Currently, over 25 Certified SOS trainers are trained, and SOS programs have been implemented in 60 schools.

Conclusion

This FY2025 Community Quality Improvement Plan is a living document reflective of a dynamic process and describes the guiding principles, environment, philosophy, structure, and processes for DBHDD. This plan describes the major roles played by DBHDD, our DBHDD agency partners, individuals, teams, and councils in the deployment and conduct of QI initiatives. It also contains a brief synopsis of many current QI initiatives completed, occurring, and planned across the agency.