

Better Data, Better Outcomes

Use of Standardized Tools in Ontario's Community Mental Health and Addiction Sector

Series 3 Workshop: Level of Care Utilization System (LOCUS)

Land Acknowledgement





Data Literacy

Better Data, Better Outcomes

Use of Standardized Tools in Ontario's Community Mental Health and Addiction(MHA) Sector

2022 Data Literacy Webinar Series! LOCUS

Learning Objectives:

- Focus on what the LOCUS is & why use it
- An overview, and examples of how to analyze the data to inform service delivery and decision making at the following levels:
 - With and for clients
 - With and for staff
 - Agency level, including functional centre level
 - Regional level including OHTs
 - Provincial level





Toward a National Standard for Service Intensity Assessment and Planning for Mental Healthcare

Level of Care Utilization System (LOCUS) Family of Tools
Overview and Quality Improvement Opportunities

Kenneth Minkoff, MD – Vice President, ZiaPartners, Inc.

kminkov@aol.com

www.ziapartners.com

LOCUS Data: QI Opportunities

Understanding Our Baseline

- **If you are using LOCUS currently:**
 - **How are you using it? For crisis and/or ongoing? What data are you collecting?**
 - **What data can you gather and analyze?**
 - **What “improvement opportunities” are you considering?**
- **If you are NOT using LOCUS currently, but considering it:**
 - **How would you use it? For crisis and/or ongoing? What data would you collect?**
 - **What data would you want to compiled and analyze?**
 - **How would using LOCUS for service intensity assessment help you?**
 - **What “improvement opportunities” would you consider addressing?**

Intro for Margo



What did we need at CMHA-WECEB?

- An objective measure to quickly evaluate the acuity of all of our Specialized Mental Health and Addiction clients.
- A tool to quickly collect objective data about our unique population of clients to swiftly drive staff and management decisions.
- Language to support clinical conversations about complex clients, between staff and managers, our CHC MD's/NP's and other multidisciplinary professionals.
- Objective data to support program decisions and highlight gaps in services where advocacy is needed.
- A tool to support a triage decision making process based on evidence and best practice.
- Our conclusion- The LOCUS

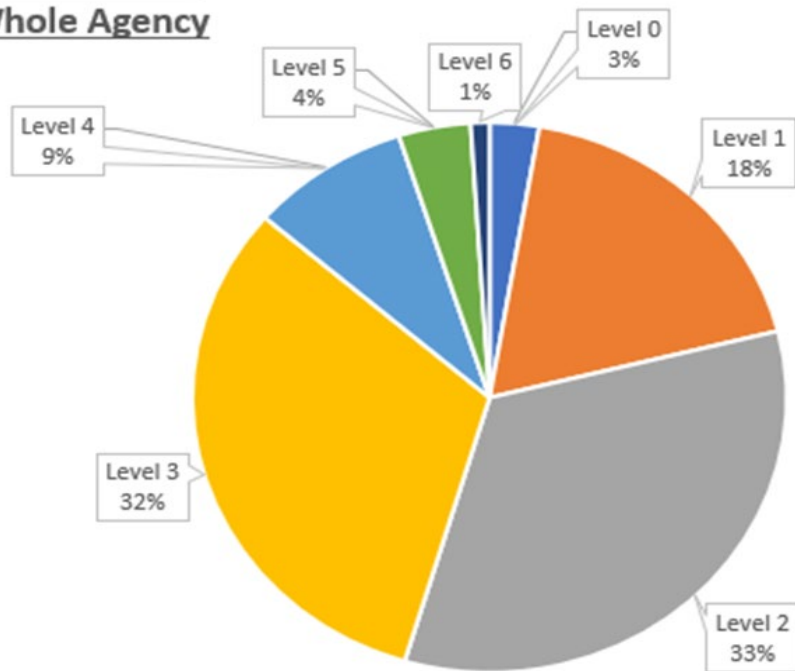


What was the initial data?

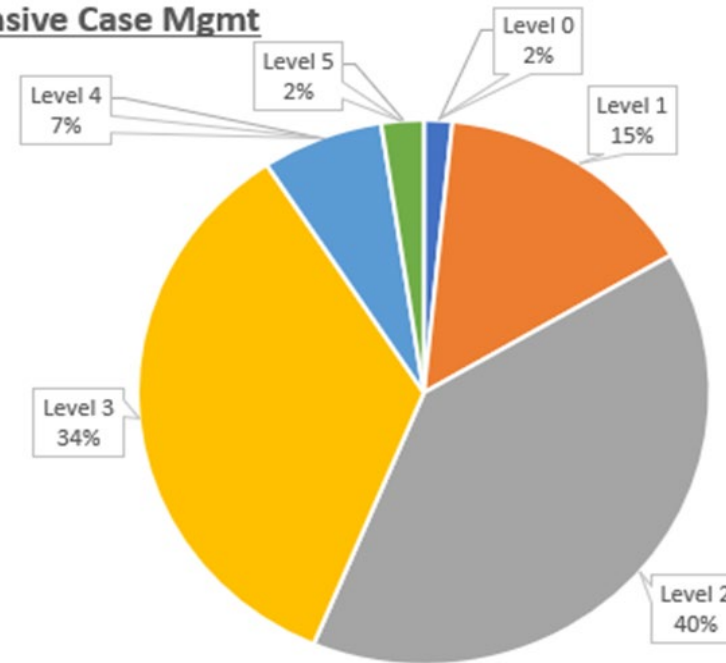
Given we were able to create a reportable form within our database, we had the ability to extract all data fields found within the LOCUS, including the ability to cross reference the acuity scores against: Programs, Staff, Date Ranges, Diagnosis, Level of Care Recommendation, Actual Level of Care.

This data was extracted in XML/CSV format and turned into a variety of Dashboards for analysis. As of October 5th, 2020 (6 months after utilization) there were 1862 completed LOCUS Forms in the system across all programming.

LOCUS Scores
Whole Agency



LOCUS Scores
Intensive Case Mgmt



Data Held the Client Stories

- Our target population of clients for mental health & addiction services including case management is **LOCUS Levels 3-5**.
- We found **450** clients who were **Level 1 and 2** in Mental health services including case management which is **not** the level of service we provide.
- Many of the 450 had years of service or what we called the “**CMHA for life**” prescription from MD’s.
- Many had **medical co-morbidities** that were not our responsibility and not in our MH&A scope of practice.
- Many **no longer had active mental health or addiction goals**.

What did we do with the data?

- Began to **evaluate every client caseload** with staff.
- Began **lots and lots of conversations** with staff about complex clients LOCUS results and client clinical presentation, measurement based assessment, other assessments to evaluate clients (PHQ-9, GAD-7).
- Considered which clients could be **discharged**.
- Reinforced Stepped Care. Considered which clients could be **better served by another resource**.
- Began conversations with clients and community partners about CMHA services moving to a mental health and addiction goal focused approach.



Learning with LOCUS

- Our target for Therapy services is **LOCUS Level 2**. LOCUS is completed when the client is referred to therapy from either an internal or external source.
- Average length of stay (LOS), entry to exit in Focused Recovery Case Management program is 4.2 months of service.
- Of 1022 Entries to service this fiscal to date (April 2022-February 2023), only 52 clients are re-readmissions with LOCUS level 3 or more.
- The LOCUS was initially done every 3 months, until adoption of the Independent Living Skills Survey (ILS) which replaced the OCAN.
- The LOCUS is completed at entry and exit and when clinically relevant during case management.



LOCUS Data:

QI Conversation Starters for Clients and Staff

- **For clients:** Are individual clients or cohorts of clients in the right LOC – acute or ongoing?
- How can we use LOCUS to engage clients in the service intensity assessment process?
- How can we improve our ability to explain service intensity needs and assignments?
- How can LOCUS help us with transition planning?

- **For staff:** How consistent are staff in making accurate LOC decisions – acute or ongoing?
- How do we support and measure inter-rater reliability?
- How do we help staff to not “game” the scoring?
- How can we improve our ability to explain service intensity needs and assignments?
- How can LOCUS help us with transition planning?

LOCUS Data: QI Conversation Starters for Programs and Agencies

For programs: Are our clients in the right LOC?

- Are we accepting clients who match our LOC?
- How can we monitor and improve transitions?
- Are we connected to a continuum of LOCs that meet the needs of our clients when transitions are needed?

For agencies: How well do we map available services to client needs?

- To what extent are cohorts of current clients in the right LOC?
- How can our utilization managers be more effective in planning transitions up and down?

Acute and ongoing services can both be applied to ALL these questions.

LOCUS Data: QI Conversation Starters for Regional and Provincial Behavioural Health Planners

For regional or provincial behavioural health planners:

- How well do available services map to the continuum of needs?
- To what extent are cohorts of current clients in the right LOC?
- How can our utilization managers be more effective in planning transitions up or down?
- How can we use aggregate LOCUS data – matches and mismatches – to plan for future resource allocations?

Acute and ongoing services can both be applied to these questions.



PLEASE PROVIDE YOUR FEEDBACK!

How to connect:

Do you have questions about

- How to start with the tool?
- Individual or group licenses?
- Any other LOCUS questions?

Please contact:

Dr. Ken Minkoff: kminkov@aol.com

Stephanie Smit-Dillard: stephanie.smit-dillard@communitypsychiatry.org

Let us know if you have interest in pulling together a user group or community of practice! Please send an expression of interest to:

imasse@ontario.cmha.ca

ldaly-trottier@ontario.cmha.ca



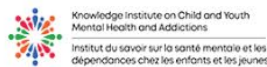


QI INNOVATIONS

**BETTER DATA
BETTER DECISIONS
BETTER OUTCOMES**

2023 VIRTUAL CONFERENCE

camh



REGISTRATION NOW
OPEN!

APR. 18, 2023

[CLICK HERE TO REGISTER](#)

Governance and Leadership Training

Our governance and leadership training on quality improvement (QI) and measurement is delivered to senior leaders and/or the board of directors of an organization. We provide a general overview of QI, data-driven decision making and how these areas can support organizational and strategic priorities. We focus on the role of senior leaders in championing, guiding and building a quality culture. The training is customized to your organization's needs based on your objectives and where you are in QI culture and in performance management



To schedule a training session or If you would like more information about Governance and Leadership training options, please contact

The E-QIP team quality@e-qip.ca



Quality Improvement and Data Consultations

Free customized coaching and support



Meet with an EQIP QI and Data Coach for support on

- ✓ Quality Improvement Planning
- ✓ Uptake and Use of standardized tools
- ✓ Leveraging your data for QI activities
- ✓ Target Setting/Performance Measurement

Want to learn more?

[CLICK HERE TO REQUEST A CONSULTATION](#)



Foundations to QI (IDEAS) e-Course



- ✓ Self-Directed
- ✓ 6-10 hours to complete
- ✓ Based on Model for Improvement
- ✓ 7 Modules
- ✓ FREE to register!

Want to learn more?

[CLICK HERE TO REGISTER!](#)

E-QIP is delivered in partnership by

- ▶ Addictions and Mental Health Ontario
- ▶ Canadian Mental Health Association, Ontario Division
- ▶ Provincial System Support Program at CAMH
- ▶ E-QIP's work is funded by the MHA Centre of Excellence and will support the priorities as laid out in the Roadmap to Wellness

