

Behavioral Health Contractor Feedback from 11/27/18 Forum

Note: Feedback incorporated from survey (black), *post-its* (blue), and *communications breakout session* (orange). Duplicate feedback is not noted and some feedback was heard in multiple settings

Overall Forum Usefulness (from survey):

ANSWER CHOICES	RESPONSES	
Extremely useful	9.80%	5
Very useful	35.29%	18
Somewhat useful	43.14%	22
Not so useful	9.80%	5
Not at all useful	1.96%	1
TOTAL		51

Additional Topics/Content Requested (survey):

- More detail on all subjects covered
- Provide clarity on staffing:
 - Which current staff are responsible for what and who to communicate with
 - Plans to hire more administrative staff
 - Share staff emails and contact info
 - Staffing changes
 - How is DHS addressing current staff shortages?
- More information on current and future programs:
 - Restructured Access Team
 - Expanding Mobile Support Team
 - How and when will DMC-ODS be implemented
 - More specifics on specialty mental health plan: what work is DHS work, what is contractor work, how does it align with other work in the community?
 - MHSA: funding and redirection
 - PHF (what it is, need, funding, site, are we partnering with hospitals)
 - WPC implementation (who will providers be included? SUD)
 - Timelines for program roll outs
- More specifics on the budget:
 - Broken out by revenue
 - Projections for next year
 - How realignment funding works
 - Potential new funding sources
 - What did it mean that Medicare billing was being reinstated? How can contractors help?
- More specifics on how BH will achieve its vision:
 - What resources are need to achieve the vision DHS laid out? What is the timeline?

- Steps and workplans to achieve vision
- Rationale for changes in structure
- How are redesign elements being prioritized?
- How can contractors and BH work better together?
 - Providers would like to be engaged in redesign development
 - Will there be an opportunity to partner on workflow of new hub sites?
 - How can partners provide input on the PHF and transition of care?
 - Departmental challenges that partners could help with
 - Partnering around funding opportunities (SAMHSA?)
 - Letters of support needed for DMC-ODS?
- The current system:
 - Managing the impact on client care that fiscal crisis caused
 - Bottle necks of acute and chronic care patients
 - Presumptive transfer
 - Entitlement versus continuum of care reform
 - More info on Title IX
 - Plans for front end diversion
 - Numbers served by BH
 - Ways to reduce recidivism (residential treatment, housing)
 - How to reduce need by improving system
- Improved contracts communication:
 - General understanding of process and specific timelines
 - When to expect final (current FY 18-19) contracts?
 - More information on updates to contracts and payment
 - New programs and contractor opportunities
 - Feedback on contractor quality of work (how can we do better?)
 - Status of MHSA contracts going forward
 - Contract maximums
- Competitive procurement
 - Plans for engagement (RFP, selecting services)
 - Which programs would be included and which would be exempt and how will the county decide?
 - Is now the right time?
 - Would like a more participatory stakeholder engagement process
 - HSD model of engaging peers in review panel
 - Let providers be creative about the services they provide.
 - Notify all providers when RFPs go out
 - Connect to Upstream Investments criteria
- More information about internal DHS processes:
 - How is DHS improving internal communications?
 - Acronym list
 - Provide Tours of new facilities at the Lakes
 - Implementing Lean Process?

Preferred Formats for Communication (survey):

ANSWER CHOICES	RESPONSES	
Regular Contractor Forums	56.86%	29
Regular Contractor Phone Calls	35.29%	18
Regular Email Blasts	39.22%	20
Email Blasts as Needed	47.06%	24
Regular Contractor Newsletter	23.53%	12
Updated information on website	25.49%	13
Other (please specify)	15.69%	8
Total Respondents: 51		

- Organize by provider type:
 - Regularly scheduled and held meetings by contractor type
 - Break out discussions on specific focus areas: clinical, prevention, MHSA, etc.
- Email blasts instead of newsletter
- Newsletter as needed
- Regularly scheduled meetings with county staff (PIP)
- One-on-one meetings with staff
- More meetings like this one with defined agenda and break out discussion
- Update information on the website
- Monthly Medi-Cal meetings are good example of how to keep contractor updated, problem-solve
- Would like quarterly meeting to hear about DHS-BH updates

Frequency of communication by format

	SEMI-ANNUALLY	QUARTERLY	BI-MONTHLY	MONTHLY	MORE FREQUENTLY	NOT AT ALL	TOTAL
Contractor Forums	47.06% 24	39.22% 20	7.84% 4	3.92% 2	0.00% 0	1.96% 1	51
Contractor Phone Calls	12.50% 5	40.00% 16	12.50% 5	15.00% 6	2.50% 1	17.50% 7	40
Email Blasts	0.00% 0	13.64% 6	9.09% 4	54.55% 24	20.45% 9	2.27% 1	44
Contractor Newsletters	7.69% 3	23.08% 9	7.69% 3	33.33% 13	10.26% 4	17.95% 7	39
Website update notifications	2.27% 1	18.18% 8	0.00% 0	31.82% 14	38.64% 17	9.09% 4	44
Other	0.00% 0	20.00% 1	0.00% 0	0.00% 0	20.00% 1	60.00% 3	5

- Semi-annual or quarterly contractor forums
- Quarterly contractor phone calls
- Monthly emails or monthly/quarterly newsletters
- Website updated monthly or more frequently
- Other:
 - Greater responsiveness from staff
 - Calls and emails as needed, always
 - Canceling meetings, especially at the last minute, is disruptive
 - Key time to discuss with leadership (as in this forum)
 - When staffed up, have staff attend more partner meetings
 - ID staff person that partners to reach out to answer State questions about regulations
 - Engage partners to go together to advocate at the State

Other Feedback:

- Improve presentation skills and make sure materials accessible and easily converted from government speak into form easy to understand by contractor community
- Improve the flow of presentations and the materials presented
- Improve organization of meetings
- Participants appreciated the transparency and effort to improve communication
- Provide more specific details on how we're moving forward, how system works, etc.
- Provide more opportunities for discussion and dialogue (e.g. breakout sessions at the end of the meeting, table talks)
- Contractors are ready to help!
- Would also like to be able to network with other providers
- Frustrated by delayed payments

- Use “we” language instead of “us” and “them”
- The Committee for Healthcare Improvement’s Behavioral Health Workgroup (led by St. Joseph Health) would be a good place to plug in.
- Providers interested in participating on ballot measure
- How can providers engage in Mental Health Board, Mental Health Services Act Steering Committee?