

IHS/SAMHSA National Behavioral Health Conference

Weaving Visions for a Healthy Future

June 28 – 30, 2005

IHS Behavioral Health Applications

Presented by:



Peter Stuart, MD

Chinle Comprehensive Health
Care Facility

Wendy Wisdom, MSW

Phoenix Indian Medical
Center

Mike Gomez

Oryx Program Manager

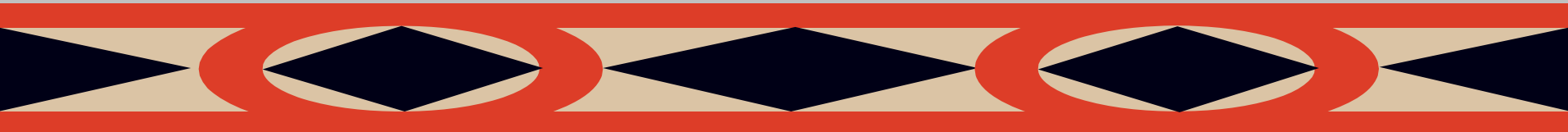
B J Bruning, MA, LSW

CNI Technology Division

Transforming Your Practice

The Institute of Medicine
“Crossing the Quality Chasm”
2001

“Information technology...holds enormous potential for transforming the health care delivery system...”



Transforming Your Practice

The Institute of Medicine
“Crossing the Quality Chasm”
2001

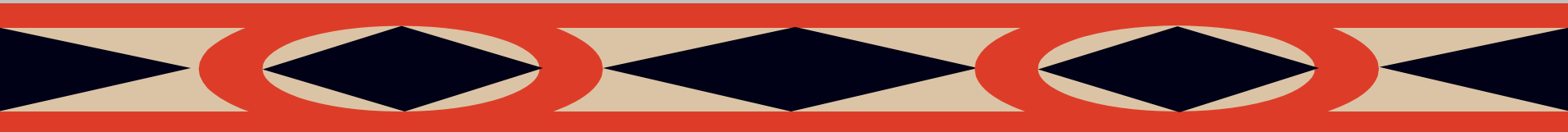
“...to take advantage of information technology a nationwide effort is needed to build a technology-based information infrastructure that would lead to the elimination of most handwritten clinical data within the next 10 years.”

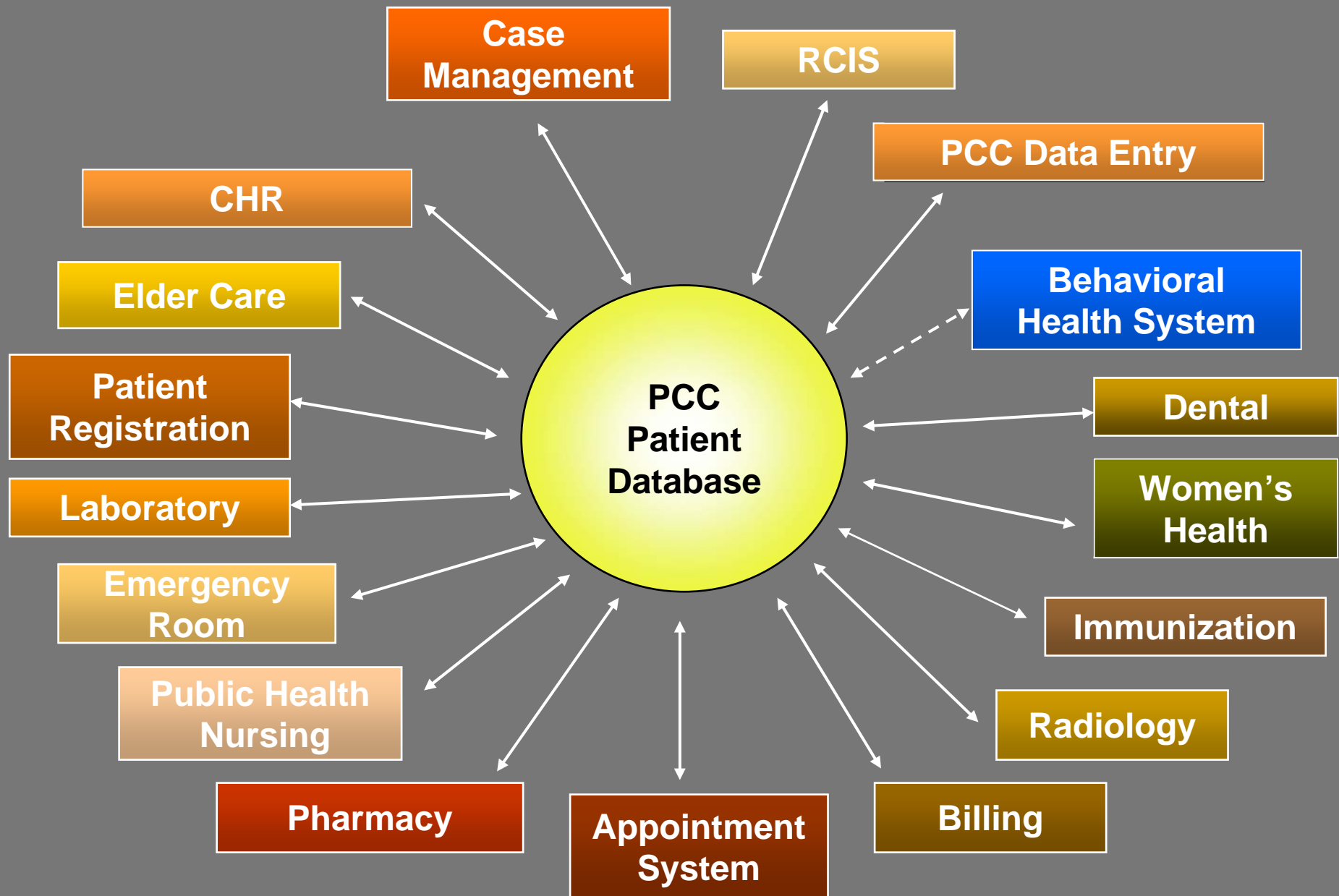


FAQ: What is RPMS?

Resource and Patient Management System is an integrated solution for management of clinical and administrative information.

Really Powerful at Measuring Suff!





FAQ: How many sites are using the BH applications?

Total Sites Identified: 250

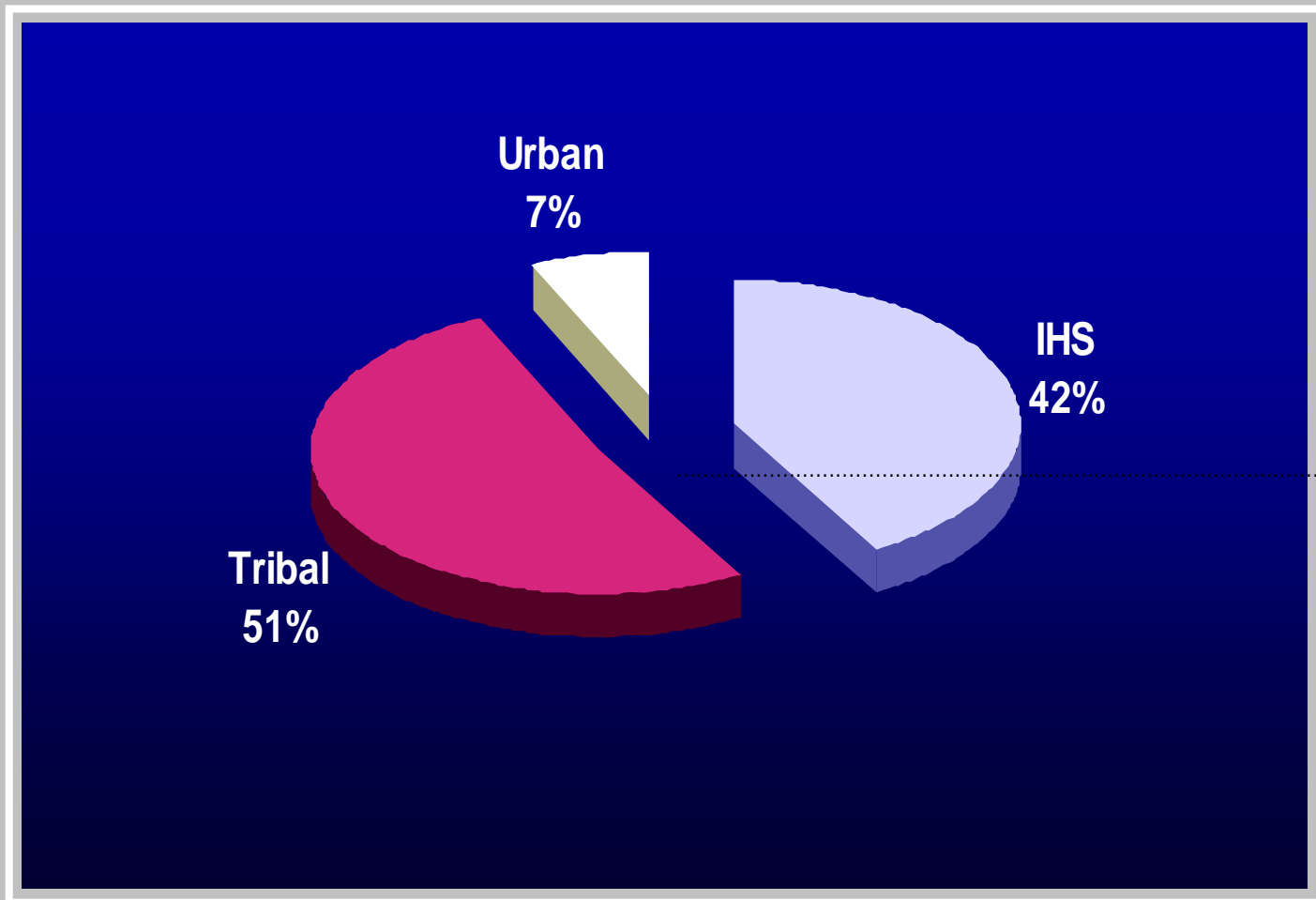
Region	Count
Alaska	4
Portland	10
California	41
Phoenix	36
Navajo	24
Tucson	3
Albuquerque	24
Billings	29
Aberdeen	15
Bemidji	21
Oklahoma	20
Nashville	23

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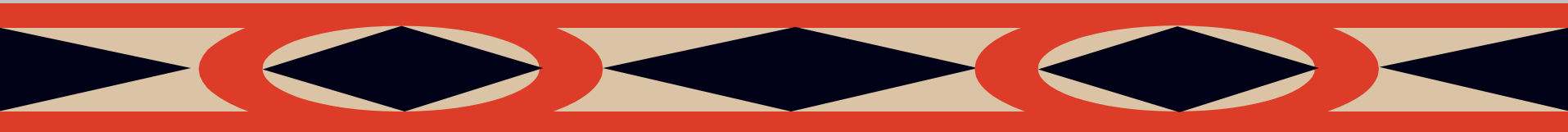
What type of programs are using the RPMS BH applications?





Weaving In ...

*Health
Information Technology*

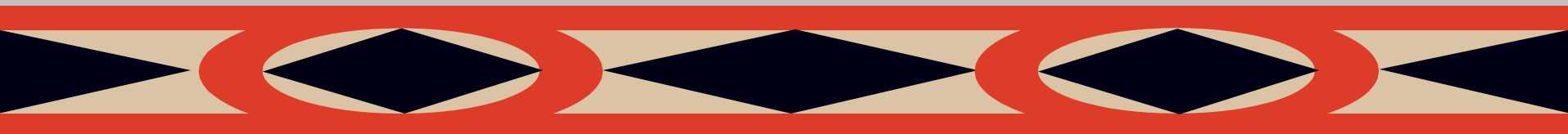


FAQ: Why would a site want to use the RPMS BH applications?

- Facilitate recording and reporting on both direct patient care and program activities.
- Interface with RPMS applications and support third party billing.
- Assist sites in meeting JCAHO, CARF, and GPRA reporting requirements and standards.
- Facilitate service coordination with the goal of improving outcomes.

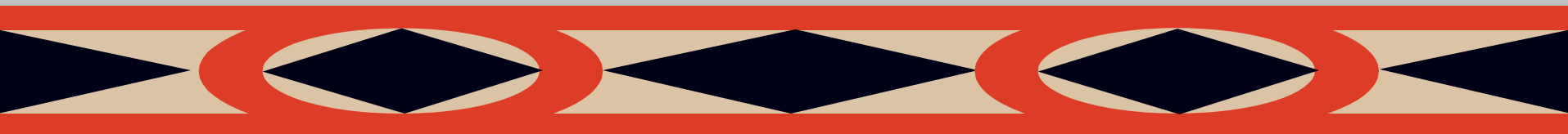
What is BHS v3.0?

- **RPMS “roll and scroll” BH application**
- **Integrated application for use by I/T/U MH, A/SA and SW providers.**
- **Combines elements from:**
 - MH/SS 2.0 (plus Suicide Form)**
 - Navajo Version of MH/SS 2.0**
 - CDMIS v4.1**



What is BH GUI?

- **Graphical User Interface to BHS v3.0**
- **Designed for provider entry of clinical data**
- **Friendly, intuitive, easy to learn**
- **BH Component resides within IHS Patient Chart**
- **Only BH providers have access to BH component**



* BEHAVIORAL HEALTH VISIT UPDATE * [press <F1>E when visit entry is complete]

Encounter Date: JUN 8,2005

User: BRUNING,BJ

Patient Name: NECONIE,LUKE

DOB: 7/8/34

HR#: 106363

PROGRAM: MENTAL HEALTH

LOCATION OF ENCOUNTER: DEMO HOSPITAL

CLINIC: MENTAL HEALTH

APPOINTMENT

TYPE OF CONTACT: OUTPATIENT

ARRIVAL

COMMUNITY OF SERVICE: LAWTON

ANY SECC

CHIEF COMPLAINT:

SOAP/PROGRESS NOTE (press enter to update, T

COMMENT/NEXT APPOINTMENT (press ENTER to up

Display Currently Dispensed Meds? N MED

IPV/DV Screening Done? N

ANY CPT CODES? Y

PURPOSE OF VIS

PLACEMENT DISPOSITION:

ACTIVITY:

ACTIVITY TIME:

BHS v3.0

BH GUI

BH Visit Documentation				DEMO HOSPITAL	
	M	05/09/1978	27	306531433	105056
Primary Provider	BRUNING,BJ			Encounter Date	6/8/2005
Program				Encounter Location	DEMO HOSPITAL
Clinic				Appointment or Walk-In	
Type of Contact				Community of Service	
Arrival Time	1200				
POV	CC/SOAP	Rx Notes	Visit Admin	CD STG	Wellness
POV (DSM Diagnosis or Problem Code)					
Axis I: Clinical Disorders; Other Conditions That May be a Focus of Clinical Attention					
Axis II: Personality Disorders; Mental Retardation					
Code	Narrative				Add Edit Delete
Axis III: General Medical Conditions					
Axis IV: Major Psychosocial and Environmental Problems					
Code	Narrative				Add Delete
Axis V: Global Assessment of Functioning (GAF) Scale					

FAQ: What do the applications include?

- **Encounter Documentation**
 - Individual
 - Group
 - Administrative
- **Wellness**
 - Patient Education
 - Health Factors
 - IPV/DV Screening
- **Health Summary**
- **Reports**
- **Treatment Planning**
- **Case Status**
- **Designated Provider**
- **Suicide Surveillance Form**



Enhancements

BHS v3.0 Patch 4

BH GUI (Patient Chart) v1.5

FAQ: What's changed?

**FAQ: What is the change
management process?**

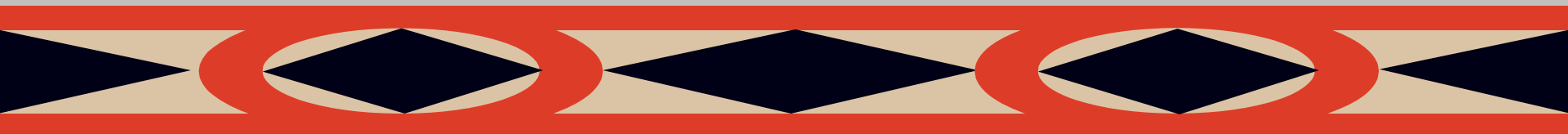


Enhancements

- **New Activity & Problem Codes**
- **Revision of crosswalk from DSM-IV-TR to ICD-9 Codes**
- **Suicide Form modifications**
- **Addition of “Wellness” Tab which displays BH and PCC data**
 - Patient Education
 - Health Factors
 - IPV/DV Screenings (and reports)
- **Enhanced group functionality**

Change Management Process

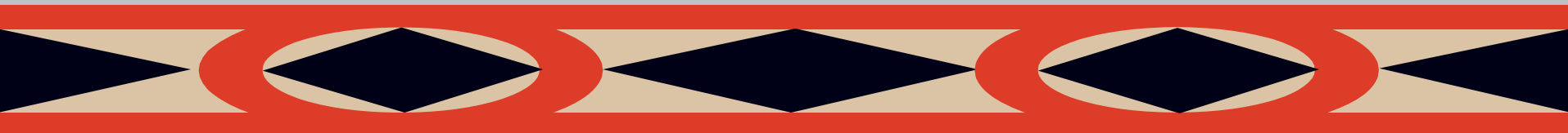
- **Feedback from users**
 - ✓ Bugs
 - ✓ Enhancements
- **Reach for consensus**
- **Consult with Subject Matter Experts**
- **Prioritize Development**
- **Test and release patch or version**





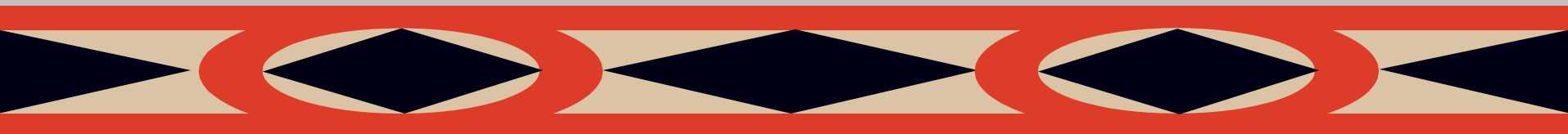
Weaving in...

*Agency and DBH
Suicide Prevention
Initiatives*



Suicide Surveillance and Data Collection

- Suicide reporting form in existing RPMS BH applications
- Deployment of suicide form in RPMS PCC and RPMS EHR by end of FY05
- Exporting of suicide data
- Baseline suicide data FY06
- Web-based access to suicide data



Local Case Nbr

Provider

Date of Act

Community Where Act Occurred

Relationship Status

Employment Status

Education

If less than 12 years,
highest grade
completed

Self Destructive Act

Location of Act

Previous Attempts

Lethality

Disposition

Method

Substance Use

Contributing Factor(s)

Narrative

- | | |
|--|--|
| <input type="checkbox"/> Gunshot | <input type="checkbox"/> Carbon Monoxide |
| <input type="checkbox"/> Hanging | <input type="checkbox"/> Overdose: |
| <input type="checkbox"/> Motor Vehicle | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Jumping | <input type="text"/> |
| <input type="checkbox"/> Stabbing/Laceration | <input type="checkbox"/> Unknown |

Overdosed Using

Add

Edit

Delete

Save

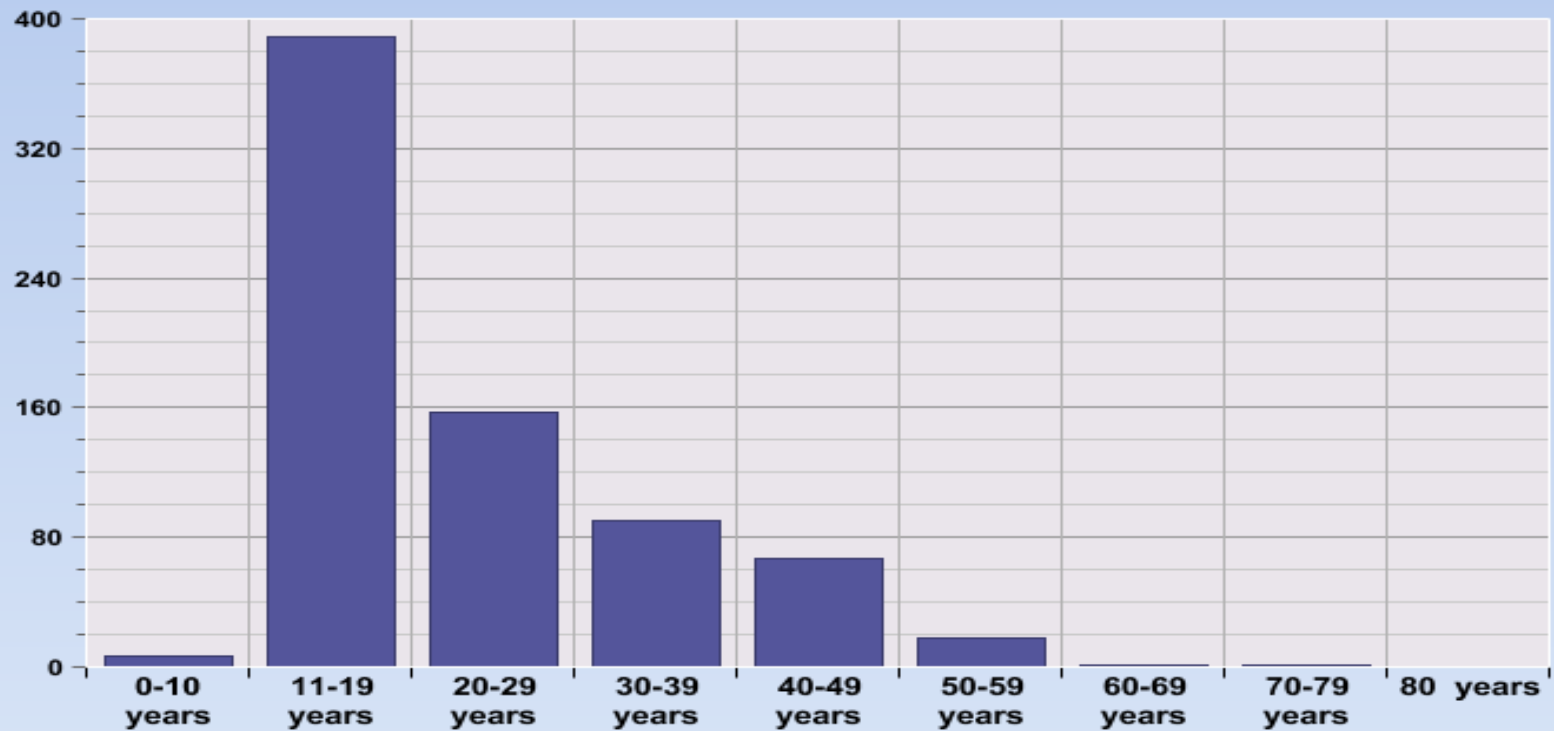
Close

Level of Activity for Patients Treated for All Suicide Events as Primary Diagnosis

Data Exported From the MH/SS System

All Suicide Activities (POV 39, 40, 41) in All Areas

Data Represents Unduplicated Visits by Location, DOB, Encounter Date

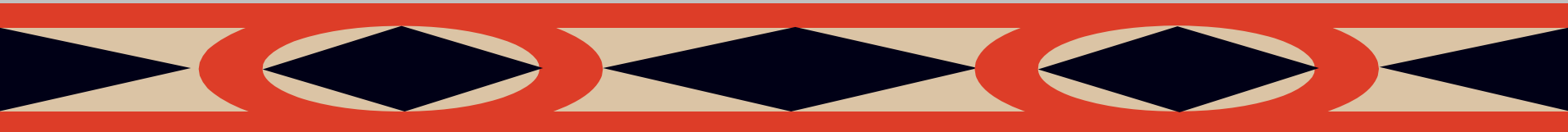


0-10 years	11-19 years	20-29 years	30-39 years	40-49 years	50-59 years	60-69 years	70-79 years	80+ years
7	389	157	90	67	18	1	1	0



Weaving In ...

*Security
and
Confidentiality*



RPMS Security Features

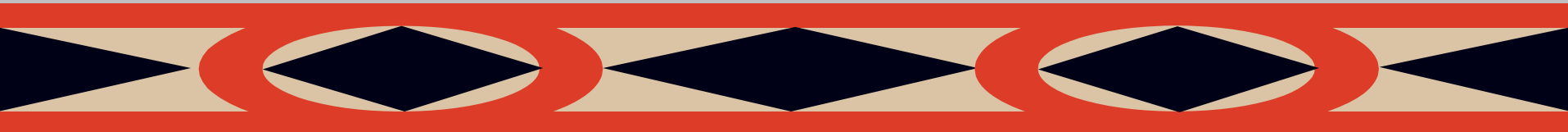
- **Governed by “Need to Know” basis**
- **RPMS Access and Verify Codes**
- **Security keys for each application**
- **Menu and Site Parameter Options**
- **Sensitive Patient Tracking**

HIPAA Compliance and Electronic Health Records

- **Role-based, “need to know” access controls with password-based security**
- **Audit trails of who accessed a record**
- **Secure transactions/transmissions**
- **Firewalls, VPN (Virtual Private Network), encryption**

HIPAA Compliance and Electronic Health Records

- **Computer screens not in plain view**
- **Patient notification of information practices**
- **Security standards policy and procedures and staff training**



42 CFR Part 2

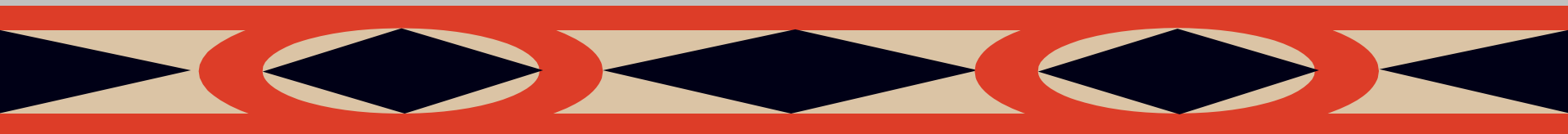
- Federal law established in the early 1970's to address the stigma associated with substance abuse and fear of prosecution when entering treatment
- Confidentiality regulation that affords a higher level of protection to alcohol and substance abuse patient information
- HIPAA does not supersede 42 CFR Part 2

[http://www.hipaa.samhsa.gov/download2/SAMHSA's
Part2-HIPAAComparisonClearedWordVersion.doc](http://www.hipaa.samhsa.gov/download2/SAMHSA's%20Part2-HIPAAComparisonClearedWordVersion.doc)

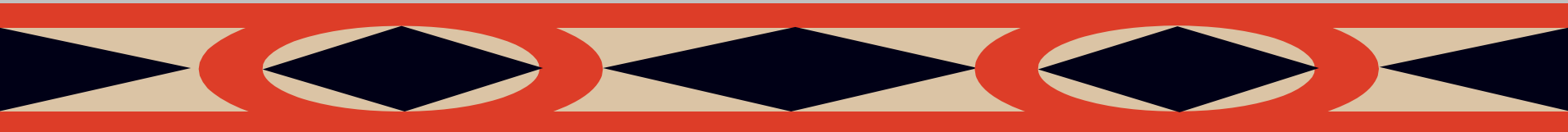
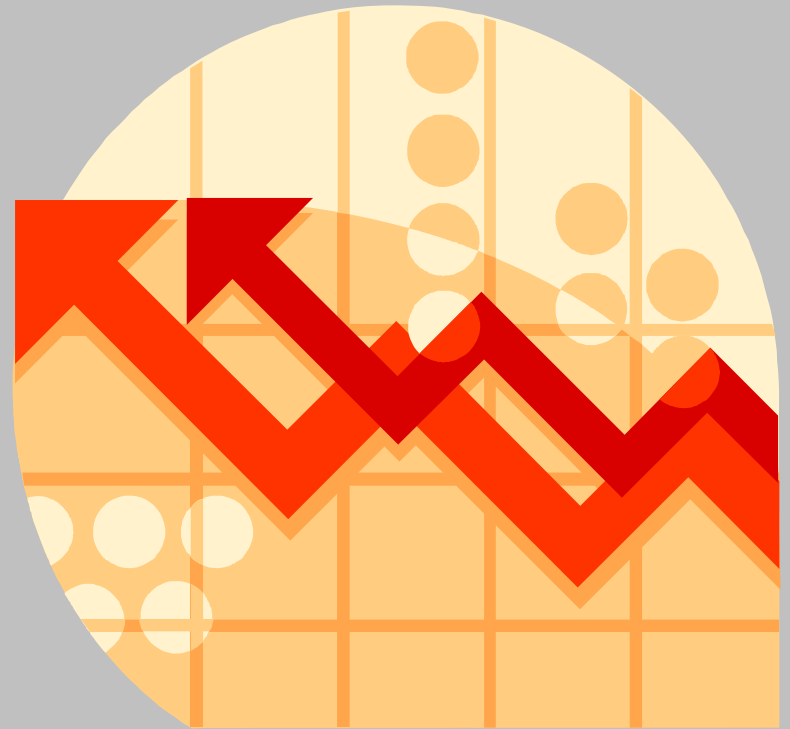


Weaving In ...

Quality Clinical Performance

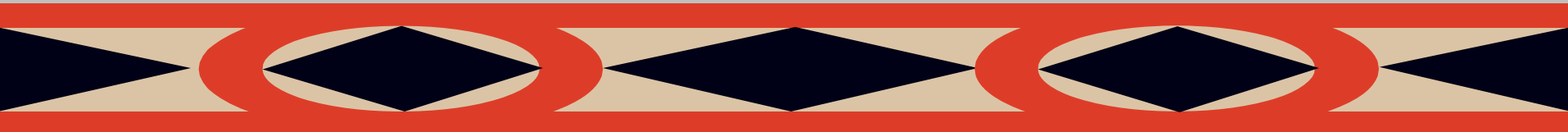


FAQ: What are GPRA and CRS?



GPRA

- **The Government Performance and Results Act (GPRA) requires Federal agencies to demonstrate that they are using their funds effectively toward meeting their missions.**
- **IHS GPRA indicators include measures primarily for clinical prevention and treatment, but also quality of care, infrastructure and administrative efficiency functions.**



CRS

- **The Clinical Reporting System (CRS) is an RPMS application designed for national reporting as well as local and Area tracking of any clinical performance indicator that is based on RPMS data.**
- **It is a reporting tool used by IHS Office of Planning and Evaluation to collect and report RPMS-based clinical performance results annually to HHS and OMB as well as for Area Director Performance measures.**

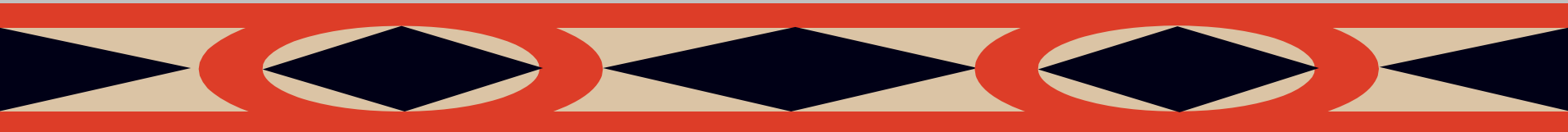


FAQ: Does CRS interact with RPMS BHS?

- **CRS primarily uses data found in the RPMS Patient Care Component (PCC) ; this includes data from BHS (*if the link to PCC is on*)**
- **Searches for standardized code fields only, such as Purpose of Visit; Patient Education, Health Factors, etc.; it will not search for text data from clinical notes or treatment plans**
- **Data shared for national GPRA reporting are total patient counts and percentages only and does not include any patient identifiers**

Behavioral Health Indicators

- **Domestic Violence Screening**
 - IPV/DV Exam Code on Wellness Tab
- **Screening for Tobacco Use/Exposure to ETS**
 - Health Factor on Wellness Tab
- **Alcohol Screening for Women**
 - CAGE Health Factor
 - An alternative to CAGE is in development
- **Depression Screening**
 - POV screening code 14.1
 - RPMS Screening Exam Code in development



CRS/GPRA Resources

1. CRS

<http://www.ihs.gov/cio/crs/>

2. GPRA

<http://www.ihs.gov/NonMedicalPrograms/PlanningEvaluation/pe-gpra.asp>

3. Area GPRA Coordinators



Weaving In ...

**Standards of
Care:**

JCAHO

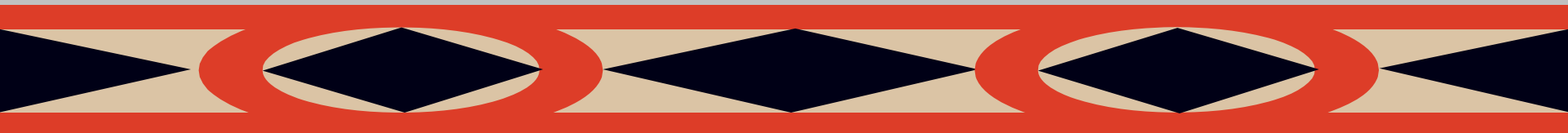
BH Applications and JCAHO Standards

- **Management of Information (IM)**
 - The goal of the information management function is to support decision making to improve client outcomes; improve clinical/service documentation; assure client safety; and improve performance in client care, treatment, and services, governance, management, and support process.



JCAHO IM Standards

- **Information Management Planning**
- **Confidentiality and Security**
- **Information Management Processes**
- **Information-Based Decision Making**
- **Client-Specific Information**
- **Clinical Data and Information**



JCAHO Standard: PC

Provision of Care, Treatment and Services (PC)

Four core processes:

- 1. Assessing patient needs**
- 2. Planning care, treatment, and services**
- 3. Providing the care, treatment and services the patient needs**
- 4. Coordinating care, treatment, and services**





**FAQ: How do I
get the RPMS
Behavioral
Health
applications?**



Implementation Steps

- Pre-implementation (see guideline)
- RPMS Site Manager (or BH Clinical Application Coordinator)
 - Load application
 - Enter user profiles (providers)
 - Assign Access and Verify Codes
 - Set Site Parameters (defaults) as directed by BH Clinical Application Coordinator (or BH Program Manager)
- Identify Super Users
- Establish BHS Export process (who, when, how)
- Schedule training
- Establish standards for use (consistent coding) and timelines for implementing desired functions



Implementation Tools

- **Area Trainings**

<http://www.ihs.gov/cio/rpms/index.cfm?module=Training&option=index>

- BH GUI - BHS v3.0
- BHS Reports & Manager Utilities

- **Implementation Visits**

- User start up, one-on-one training, and with exports

- **Training Materials**

- Pre-Implementation Guide
- User Manuals, Training Manuals, Job Aides



Resources

- **IBH Website**

- <http://www.ihs.gov/cio/bh/>

- **Patient Chart Listserv**

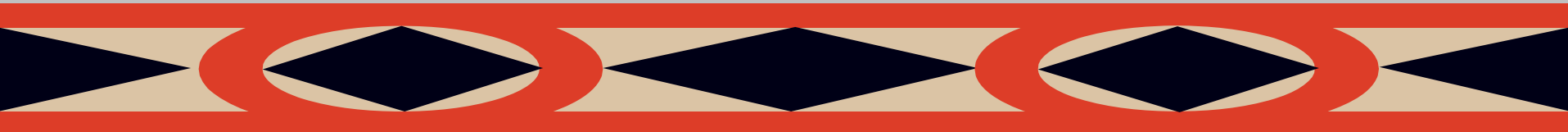
- **To subscribe:**

- <http://www.ihs.gov/cio/listserver/index.cfm>

- **Service Center – Help Desk**

- **(888) 830-7280**

- support@ihs.gov



Weaving In ...

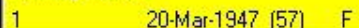
Agency Initiatives:

Electronic Health
Record



EHR and Behavioral Health

- Access to RPMS BH functionality via EHR is under development
- EHR functionality will be available to BH providers including order entry templates for progress notes, assessments, etc.
- Non-EHR sites will still be able to use BH GUI and BHS
- Future BH development includes treatment planning and the VA MHA



LAMER, CHRISTOPHER CLAYTON

CAD



No Alerts Found

[illegible]

Crisis Alert ▲

Crisis Alert ▲	Date
ADVANCE DIRECTIVE	25-Jan-2005 13:47
CRISIS NOTE	06-Jul-2004 11:12

Agent ▲

Agent	Reaction
ALLERGIC TO FLIES	WEIGHT GAIN
ASPIRIN	
BEE STINGS	HIVES/ANXIETY
EASY OPEN CAPS	EASY OPEN CAPS
EGGS	RASH
FLIES	
IODINE	ANAPHYLAXIS
METOCLOPRAMIDE	DROWSINESS
PEANUTS	HIVES
PHENYLEPHRINE/PRO...	muscle irritability
POLLEN EXTRACTS FRE...	CHILLS
POVIDONE IODINE	RASH
SILVER NITRATE	DERMATITIS CONTAC...

No Reminders Found

[illegible]

Error Retrieving Problem List...

[illegible]

Appointment/Visit	Date ▾	Status
Payne	12-Apr-2005 14...	
Payne	29-Mar-2005 1...	CANCELLED BY PATIENT
FARRELL FP-15	16-Mar-2005 1...	
Payne	01-Mar-2005 1...	
ULTRASOUND-2	25-Feb-2005 0...	CANCELLED BY PATIENT
PT student	22-Feb-2005 1...	CANCELLED BY CLINIC
CONTINUITY O...	22-Feb-2005 1...	AMBULATORY
HYDE-G SAME ...	22-Feb-2005 1...	
<PHYSICAL TH...	22-Feb-2005 0...	AMBULATORY
<PHYSICAL TH...	22-Feb-2005 0...	AMBULATORY
HYDE-G SAME ...	18-Feb-2005 1...	CANCELLED BY CLINIC
HYDE-G SAME ...	18-Feb-2005 1...	CANCELLED BY CLINIC
PT student	18-Feb-2005 1...	CANCELLED BY CLINIC
<PHYSICAL TH...	18-Feb-2005 1...	AMBULATORY

Lab Order ▲

[illegible]

User Patient Tools Help

Patient Chart Communication RPMS VA Education Micromedex E-Mail

Hiwalker, Stellar S

7655

03-Jul-1960 (44) F

PEDIATRIC 15-Jan-2004 14:04
DOCTOR,TESTNo
Postings

Education: Show Standard

Add

Edit

Delete

Visit Date	Education Topic	Comprehension	Status	Objectives	Comment	Provider	Length	Type	Location
04/27/2004	M-INFORMATION	GOOD				DOCTOR,TEST	5	Individual	CROW HO
09/28/1998	WH-BREAST EXAM					BERG,HORACE			CROW HO
09/12/1996	WH-BREAST EXAM					WEINSTEIN,SHARIEDA D			CROW HO
10/27/1993	WH-BREAST EXAM					JENSEN,AMY P			LDG GRASS HC
12/20/1991	WH-BREAST EXAM					DEL-CZARNICK,DONNA			LDG GRASS HC



Health Factors:

Add

Delete

Visit Date	Health Factor	Category	Qty	Se
07/17/2003	NON-TOBACCO USER	TOBACCO		



Exams:

Add

Edit

Delete

Visit Date	Exams	Result	Comments
05/02/2000	PELVIC EXAM		
02/04/1999	BREAST EXAM		
02/04/1999	PELVIC EXAM		
09/28/1998	BREAST EXAM		

Skin Test History:

Print Record

Add

Edit

Delete

Visit Date	Skin Test	Location	Age@Visit	Result	Reading	Read Date
04/28/1996	PPD	Crow Ho	35 yrs		0	04/28/96



Reproductive Status:

G: 0 P: 0 LC: 0 SA: 0 TA: 0 LMP: 10/22/1999 ...

Early Planing Method: Partner Sterilized Date FP Began: ...

☐ Pregnant Est. Delivery: ... Determined By: ...

Immunization Forecast:

Contraindications:



Immunization History:

Print Record

Due Letter

Add

Edit

Delete

Vaccine	Visit Date	Age@Visit	Location	Reaction	Volume	Inj. Site	Lot	VIS Date
Td-ADULT	11/28/1986	26 yrs	Ldg Grass Hc					
Td-ADULT	04/26/1996	35 yrs	Crow Ho					
INFLUENZA	11/05/1999	39 yrs	Crow Ho				U0159AA	01-Jun-1999
INFLUENZA	11/05/1999	39 yrs	Undesig Locs				U0159AA	

Notifications Cover Sheet Triage Wellness Notes Orders Medications Labs Prob/POV Services Reports D/C Summ Consults

DOCTOR,TEST

CROW-TEST.BIL.IHS.GOV

CROW HO

23-May-2005 11:27



**Thank
You!**

Questions?



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