Dear Madam Chairwoman and Members of the ABCGC:

On August 18, 2016, The Behavioral Health ABCGC Steering Committee met, reviewed and discussed the Data analysis and evaluation for the Behavioral Health Initiative.

The Behavioral Health ABCGC Steering Committee recommends the ABCGC support and full funding of the Data analysis and evaluation for the Behavioral Health Initiative in the amount of \$246,553 annually from Bernalillo County Behavioral Health Tax. The Behavioral Health Steering Committee further recommends that Bernalillo County pursue a contract with the University of New Mexico's Institute for Social Research to fulfill the obligations described in the proposal. The Behavioral Health Steering Committee recommends evaluation of the UNM ISR scope of work prior to June 30, 2017.

Respectfully Submitted,
The Steering Committee
Absent: Constance Banuelos
Recommendation:
For7
Against_0

MEMO: Data Analysis and Evaluation Proposal

DATE: July 21, 2016

TO: ABCGC: Steering Committee

FROM: Katrina Hotrum

Executive Summary

• Proposed project: Data analysis and evaluation for the Behavioral Health Initiative.

- <u>Target population</u>: Data analysis and evaluation will occur to assess the impact of the entire Behavioral Health Initiative on the entire population of users of behavioral health services, including individual program evaluations of the effectiveness of each contracted and/or directly delivered program.
- <u>Services</u>: Data analysis; program evaluation; reporting; best practices.
- Evidence base: This proposed project would provide literature reviews of the evidence bases as well as data analysis on potential target populations to inform decision making of the ABCGC Subcommittees as well as the County. It would also create additional evidence to inform the County and the Subcommittees into the future about the impact of contracted and/or directly delivered programs.
- Proposed outcome metrics:
- Preliminary budget: \$246,553
- Proposed language of recommendation: The Behavioral Health Steering Committee
 further recommends that Bernalillo County pursue a contract with the University of New
 Mexico's Institute for Social Research to fulfill the obligations described in the proposal.
 The Behavioral Health Steering Committee recommends evaluation of the UNM ISR
 scope of work prior to June 30, 2017.

Proposed Project

Bernalillo County seeks to implement a behavioral health system which measures the effectiveness of implemented programs and constantly strives to improve the performance of programs. In pursuit of this performance management strategy, data analysis and program evaluation will be critical components of the system. To this end, the following are being proposed:

- 1. <u>Historical information and best practices</u>: Provision of information that will inform the ABCGC, its Subcommittees, and the County Commission on decision making around programs to implement;
- 2. <u>Program evaluation</u>: Evaluate all programs implemented under the behavioral health initiative:
- 3. <u>Collective impact</u>: Population-level trend analysis into the future to determine the effectiveness of the system as a whole; and
- 4. <u>Performance management</u>: The County is developing internal capacity for performance management in addition to the standard level of contract compliance oversight. Data and analysis functions may support performance management within the County as needed.

Target Population

Data analysis and evaluation will happen to inform what services are needed and how those services are performing for the following populations:

- 1. <u>Historical information and best practices</u>: This stream of work will inform what services the ABCGC, its Subcommittees, and the County should consider funding, what the best practices are around those services, and who the target populations should be for those services.
- 2. <u>Program evaluation</u>: This stream of work will inform the community, the County, and the ABCGC and its Subcommittees into the future as to whether funded programs are effective at achieving pre-determined outcomes for pre-determined target populations. These outcome metrics and target populations will be informed by the ABCGC Subcommittees as well as the evaluator. The target population for this stream of work is therefore individuals served with County gross receipts tax dollars.
- 3. Collective impact: This stream of work will inform the community, the County, and the ABCGC and its Subcommittees into the future as to whether the entire behavioral health system is having positive impacts on the entire population of Bernalillo County. The target population for this stream of work is the entire community, with specific carveouts of vulnerable sub-populations. This will include reporting on trends in vulnerable sub-populations like:
 - a. Individuals accessing behavioral health services at the Metropolitan Detention Center (MDC);

- b. Individuals accessing behavioral health services, including emergency, urgent, and inpatient at area hospitals;
- c. Individuals accessing substance abuse services from the Department of Substance Abuse Programs (DSAP) for the County; and
- d. Other sub-populations may be added over time as data sharing agreements can be negotiated with additional sources of data.
- 4. <u>Performance management</u>: This stream of work will inform County staff about ongoing performance of contractors. The target population for this stream of work is therefore individuals served with County gross receipts tax dollars.

Services

As introduced above, the four streams of work more specifically will:

- 1. <u>Historical information and best practices</u>: Provide information that will inform the ABCGC, its Subcommittees, and the County Commission on decision making around programs to implement. This information will include:
 - a. Data analyses relevant to decision making on proposed programs, including for example the ongoing work to identify high-frequency users of behavioral health services at the jail and detox facilities and matching those records to their health care and homeless services utilization in the community,
 - b. Expertise on prior studies of effectiveness or cost-benefit of proposed programs, including literature reviews of programs being proposed to the ABCGC Subcommittees.
 - c. Advice on programmatic best practices,
 - d. Advice on program design, and
 - e. Advice on data collection protocols and data collection systems.
- 2. <u>Program evaluation</u>: Propose program evaluation methodologies for all programs implemented under the behavioral health initiative, implement those program evaluations, and provide written reports on those program evaluations to the County and to the ABCGC. The statistical rigor of program evaluations, keeping in mind the realistic ability to implement a program evaluation, is important to the County.
- 3. Collective impact: Population-level trend analysis into the future to determine the effectiveness of the system as a whole for Bernalillo County. The evaluator will report on a quarterly basis to the County and to the ABCGC on these population-level trends so that decision makers may monitor how the behavioral health initiative as a whole changes outcomes system-wide over time. The evaluator will assist the County in determining which sub-populations and data sources to use for this purpose, but initially identified trends include:
 - a. Trends in the jail-based behavioral health population at MDC, including booking trends, charges, length of stay, behavioral health diagnoses, recidivism, and other data about individuals who are on the Psychiatric Services Unit (PSU) caseload;
 - b. Treatment trends at DSAP programs, including detoxification, the public inebriate program, and others, and including trends in lengths of stay, recidivism, etc.,

- c. Changes in police contacts with individuals with behavioral health needs over time, including through Crisis Intervention Teams and mobile crisis teams,
- d. Trends in individuals with behavioral health needs who are involved with the court system,
- e. Analysis of other data sets that the County and the evaluator are able to access from other sources, including health care providers, homeless services providers, local hospitals, etc. It is anticipated that this will include at a minimum the University of New Mexico Hospital.
- 4. <u>Performance management</u>: The County is developing internal capacity for performance management in addition to the standard level of contract compliance oversight. Data and analysis functions may support performance management within the County as needed. This functionality and the need for a data analysis and evaluation contractor to support this is still being determined.

Evidence Base

- 1. <u>Historical information and best practices</u>: The data analysis and evaluation provider will assist the County in learning about and sharing any existing evidence base for a given project proposal with the ABCGC and its Subcommittees. This will allow the County and ABCGC to make informed decisions about the array of services being implemented. It will also help to inform best practices in implementation of evidenced and/or non-evidenced service models.
- 2. Program evaluation: In addition to learning about what evidence there is that certain services already work, it is important to constantly re-evaluate whether services work in the context of Bernalillo County, for a given target population, using a certain method of referral and intake, etc. Simply because a program has already been evaluated may not mean that the same program will have the same outcomes in Bernalillo County in the context in which the County implements that service. Further, in cases where the ABCGC and County find that implementing a service that does not have a strong evidence base in its favor is in the best interest of the behavioral health initiative, it will be important to create an evidence base by evaluating that program going forward. Program evaluations will help the County and the ABCGC in the future determine whether to continue funding specific programs, whether to increase funding for those programs, whether to expand those programs to additional target populations, etc. This will allow the government to make the most effective use of government dollars possible on an ongoing basis.
- 3. Collective impact: Beyond studying whether services funded through the behavioral health initiative are effective, it is also important to study collectively whether the entire initiative is having an impact on the community as a whole. This will help decision makers on the ABCGC and in the County determine whether the package of services implemented through the behavioral health initiative are effective and whether the system as a whole is effective. It may help determine in the future where problem areas lie so that decision makers can target those areas for further improvement. For example, if the trend in hospitalizations for behavioral health is not decreasing even though the

population accessing behavioral health services at the jail is decreasing, there may be more work to do to prevent individuals from getting to the point of needing psychiatric hospitalization.

4. Performance management: It is also important for County staff who are managing contracts with service providers to use data to inform their daily management of those contracts. For example, this includes talking on a regular basis to contractors about their performance on given metrics like their ability to enroll high-need clients, their attrition rates, etc. County staff should then work collaboratively with contractors to improve performance in identified areas of opportunity for improvement. The data that informs this process may need to be analyzed in some way by an outside evaluator. Additionally, the County may need an outside evaluator to train service providers in data collection, management, and reporting. Finally, the outside evaluator may help the County determine the data points to use to measure various outcome metrics and what those outcome metrics should be. This functionality will be finalized as actual services are determined.

Proposed Outcome Metrics

- 1. <u>Historical information and best practices</u>: The ABCGC Subcommittees and staff will determine what information is needed as projects are discussed. This item will be constantly evolving based on the needs of the Subcommittees.
- 2. <u>Program evaluation</u>: The contractor will propose appropriate evaluation methodologies for each program, taking into consideration the outcome metrics discussed and recommended by the Subcommittees. The contractor may assist the Subcommittees in making these recommendations based on the contractors' experience and knowledge of data and evaluation.
- 3. <u>Collective impact</u>: Already identified subpopulation trends to track include the following. The Steering Committee may recommend additional trends to be tracked.
 - Trends in the jail-based behavioral health population at MDC, including booking trends, charges, length of stay, behavioral health diagnoses, recidivism, and other data about individuals who are on the Psychiatric Services Unit (PSU) caseload;
 - b. Treatment trends at DSAP programs, including detoxification, the public inebriate program, and others, and including trends in lengths of stay, recidivism, etc.,
 - c. Changes in police contacts with individuals with behavioral health needs over time, including through Crisis Intervention Teams and mobile crisis teams,
 - d. Trends in individuals with behavioral health needs who are involved with the court system,
 - e. Analysis of other data sets that the County and the evaluator are able to access from other sources, including health care providers, homeless services providers, local hospitals, etc. It is anticipated that this will include at a minimum the University of New Mexico Hospital.

4. <u>Performance management</u>: Metrics to be used in performance management will be developed through a collaborative process between County staff, contracted service providers, and the help of the contracted evaluator.

Preliminary Budget

Preliminary Budget

\$246,553 annually

Proposed Language of Recommendation

The ABCGC Steering Committee recommends that Bernalillo County pursue a contract with the University of New Mexico's Institute for Social Research substantially as described in this proposal.

Possible additional language if needed

The ABCGC Steering Committee further recommends that Bernalillo County and the City of Albuquerque consider the following in pursuit of this project:

- [to be filled in by Subcommittee]
- [example: Population-level trends that ought to be measured going forward to measure the collective impact of the behavioral health system as a whole.]

DRAFT Scope of Work

Bernalillo County, Behavioral Health Initiative Research UNM Institute for Social Research FY 2017

Scope of Work:

- 1. The University of New Mexico Institute for Social Research (hereinafter, the "ISR") will provide evaluation and analytic services to Bernalillo County (hereinafter, the "County") in support of the Behavioral Health Initiative (hereinafter, the "Initiative"). This research will be multi-year. Services provided will be no less than those identified below, but additional research and analysis may be added to the scope through written agreement (in the form of an amendment to this contract) between the County and ISR.
- 2. In collaboration with County staff, ISR will document the development of the Initiative. This includes the development of the four behavioral health sub-committees of the Albuquerque-Bernalillo County Governing Commission (hereinafter, the "ABCGC"). ISR will provide technical assistance to the County in the form of:
 - a. Data analyses relevant to decision making on proposed programs;
 - b. Expertise on prior studies of effectiveness or cost-benefit of proposed programs;
 - c. Advice on programmatic best practices;
 - d. Advice on program design;
 - e. Advice on data collection protocols and data collection systems; and
 - f. Other requested assistance with regard to programs implemented as part of the Initiative.
- 3. The ISR will perform program evaluations of all programs implemented under the Initiative, as identified by the County. The program evaluations will at a minimum cover the following programs:
 - a. Permanent supportive housing,
 - b. Mobile crisis teams,
 - c. Case management spectrum,
 - d. Prevention of adverse childhood experiences,
 - e. Community engagement teams,
 - f. Youth transitional housing,
 - g. NMCAL crisis call service, and
 - h. UNM expansion of services.

Program evaluation work performed by ISR will include:

- a. Identification and design of appropriately rigorous evaluation methodologies and outcome metrics focused to each program to be evaluated based on goals and objectives agreed upon by the County, any relevant service providers or other County contractors, and ISR. ISR will consider evaluation techniques including:
 - i. Experimental designs such as randomized controlled trials;
 - ii. Quasi-experimental designs, including before-after analyses, difference-in-differences, and regression discontinuity;

- iii. Observational methodologies; and
- iv. Process evaluation techniques.

The County will notify ISR of any new program being considered, primarily through the program approval process through the Albuquerque-Bernalillo County Governing Committee ("ABCGC"). Within 60 days of selection of an apparent successful bidder for a program (or other notification to ISR that the County has determined to move forward with a program), ISR will provide the County with a written evaluation methodology proposal, substantially in the form attached as Appendix A, and informed as needed by conversations with the apparent successful bidder. Within 30 days of receipt of an evaluation methodology proposal, the County will approve or request modification.

The evaluation methodology proposal will:

- i. Propose an appropriately rigorous evaluation methodology or methodologies (proposals may include, for example, both quasi-experimental and process evaluation techniques) and describe why the evaluation technique or techniques selected is/are the most appropriate for the program in question;
- i. With the input of the apparent successful bidder and the County, propose the outcome and/or process metrics to be measured in the evaluation and the data source(s) to be used;
- ii. With the input of the apparent successful bidder and the County, describe a proposed intake and referral process that will ensure that appropriate individuals are referred/accepted to the program;
- iii. With the input of the apparent successful bidder and the County, determine the data elements to be collected from the service provider or, in the case of direct County service delivery, directly from clients, by the County and/or ISR; and
- iv. With the input of the apparent successful bidder and the County, propose the frequency of reporting to County staff on relevant outcome and/or process metrics over the course of the study based on the usefulness of those metrics in informing implementation of services and/or contract oversight by the County.
- b. Implementation of all County-approved program evaluations.
- c. As agreed to as a component of any program evaluation methodology, and in any case where a process evaluation technique is included in a program evaluation, regular reports and/or meetings with County contract management staff to report on interim findings; and
- d. Provision of final program evaluation reports to the County at the conclusion of all program evaluations, with associated presentations of report findings to the ABCGC, County Commission, and other County staff as requested.
- 4. The ISR will provide population-level analyses based on County-defined goals and desired outcomes for the Initiative. These analyses shall include but not be limited to:

- a. Trends in the jail-based behavioral health population at the Metropolitan Detention Center (hereinafter, "MDC") (booking trends, charges, length of stay, diagnoses), including regular analysis of Correct Care Solutions data on individuals on the caseload of the Psychiatric Services Unit at MDC;
- b. Treatment trends (treatment admissions to public facilities including programs run by the Bernalillo County Department of Substance Abuse Programming (hereinafter, "DSAP"), length of stay);
- c. Changes in police contacts including through Crisis Intervention Teams and mobile crisis teams;
- d. Trends in individuals with behavioral health needs who are involved in the local court system; and
- e. Analysis of other data sets that the County and ISR are able to access from other sources, including health providers, homeless services providers, etc., as agreed to through an amendment to this contract.

UNM ISR will, on a quarterly basis based on the fiscal year, provide the County with population-level reports on the data listed above substantially in the form of Appendix B. ISR will present these reports to the ABCGC, as well as other County staff and elected officials as requested.

- 5. As requested, ISR will prepare and conduct presentations to County and other governmental agencies regarding any research task.
- 6. ISR will perform other tasks as agreed.

A. Personnel	Budget	
Name/Position	Computation	Cos
Principal Investigator - Paul Guerin	624 hours @ \$47.88 an hour	\$29,87
Senior Research Scientist 1 - Dan Cathey	624 hours @ \$31.45 an hour	\$19,62
Research Scientist 3 Research Scientist 1	1560 hours @ \$26.62 an hour	\$41,52
Research Scientist 1	624 hours @ \$23.94 an hour	\$14,90
	1040 hours @ \$16.27 an hour	\$16,92
Graduate Student Researchers	416 hours @ \$18.00 an hour	\$7,48
Undergraduate Student Researchers	1000 hours @ \$10.50 an hour	\$10.50
Business Operations Manager Subtotal	312 hours @ \$30.11 an hour	\$9,39 \$150,27
		ψ130,2 <i>1</i>
B. Fringe Benefits Name/Position	0	
Principal Investigator - Paul Guerin	Computation 40.68%	Co: \$12,15
Senior Research Scientist 1 - Dan Cathey	28.20%	\$5,53
Research Scientist 3	39.00%	\$16,19
Research Scientist 1 - Craig Pacheco	35.60%	\$5,51
Research Scientist 1 - Anne Minssen	28.04%	\$4,71
Graduate Student Researchers	1% + \$1,876 medical insurance	\$1,95
Undergraduate Student Researchers	1.00%	\$1,93
Business Operations Managers	38.72%	\$3,63
Subtotal	3327	\$49,80
C. Travel		
Mileage to observe sites and data collection	2000 x 0.42	\$84
Subtotal		\$84
D. Equipment		
None		\$
Subtotal		\$6
E. Supplies		
Supply Items	Computation	Cos
Copying Consumable supplies		\$24
AtlasTi Software License	1 year license for 5 machines	\$1,50
Computer	1 computer	\$80 \$2,00
Subtotal	, sompato.	
		\$4,54
F. Construction None		\$(
Subtotal		\$6
G. Consultants/Contracts		\$
Subtotal		
H. Other Costs		\$6
lone		\$(
Subtotal		\$6
Indirect Costs		
Description Otal Direct Costs	Computation \$205,461	Cos
Modified Total Direct Costs	\$205,461 \$205,461	
+A Costs F+A=Facilities and Administration)	20%	\$41,092
otal Personnel & Fringe Benefits		\$200.070
		\$200,073
otal Non-Personnel Costs		\$46,480

\$246,553

Total Project Cost