

A scenic sunset over a beach. The sun is low on the horizon, creating a bright orange glow that reflects on the water and sand. Waves are breaking in the distance. In the foreground, a seagull stands on the wet sand, and another is visible further right. A starfish lies on the sand in the lower right. The sky is a deep blue, and a bird is flying in the upper left.

# Elevate Behavioral Health Pinellas

**Presentation to Board of County Commissioners**

May 2020

# With you today



**Bill Zizic**  
Managing Director



**Brendan Davis**  
Director



**Vivian Demian**  
Executive Director

# Agenda

Time	Item
15 minutes	Introductions
	Project overview
	Commendations
20 minutes	Top 5 questions
	Recommendations for BCC consideration
	Project approach
	Key findings on the current behavioral health system
	Future state vision for the behavioral health system
25 minutes	Overview of options
	Overview of implementation pathways
	Comparison of implementation pathways
	Overview of implementation phases
	Summary and next steps
60 minutes	Questions

# Project overview

The objective of the project is to develop recommendations for system enhancement, integration, and improved outcomes within the Pinellas County Adult Behavioral Health System of Care.

The project deliverables are comprised of two key components:



**System design** of behavioral health innovation in Pinellas County and **roadmap** to integrated continuum of care



**Prioritization framework** for implementation of the system design

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# Commendations

**KPMG was consistently impressed by the input, passion, and dedication of the County and its stakeholders who were engaged in this process. The County operates a broad and mature set of programs and services, resulting in KPMG's desire to highlight the following selection of commendable practices observed.**

<b>Cross-systems leadership and collaboration</b>	The County has continued to embrace system-wide collaboration through the Pinellas Integrated Care Alliance (PICA) and focus on alignment across agencies and providers to improve long-term outcomes.
<b>Investment in high utilizers</b>	The County has further invested in programs to address the needs of highest-need clients, such as the Pinellas Community Empowerment Team and Health Care for the Homeless Co-occurring Assistance Recovery & Empowerment Team.
<b>Cross-system data sharing</b>	The County has made progress in enabling interagency data sharing within and outside of behavioral health by investing in the Data Collaborative and Care Connect.
<b>Focus on supportive services</b>	The County has continued to invest in programs providing supportive services for homeless individuals and aimed at ending the Opioid Crisis, such as the Co-operative Agreement to Benefit Homeless Individuals and Opioid Site Based Grant for Strategic Information Partnerships.
<b>Investment in receiving and diversion</b>	The County has shown a strong commitment to expanding and enhancing receiving and diversion options away from hospitals and jails through programs such as Personal Enrichment Through Mental Health Services (PEMHS) and Westcare Turning Point Homeless Inebriate Shelter.

# Top 5 questions

The Pinellas Project Planning Team provided KPMG with the following Top 5 questions to guide the project:

- |   |  |    |   |
|---|--|----|---|
| 1 | Do we have the data to know <b>how well our system of care is performing</b> in terms of access, capacity, productivity, and quality outcomes? | >> | <b>No</b> , we do not, based on the data reviewed.  |
| 2 | Should we build a <b>new Marchman facility</b> or <b>expand current capacity</b> ?   | >> | <b>No</b> , not until we have better system-level data on capacity, utilization, and productivity.  |
| 3 | Should we <b>increase case management</b> compliment to better accommodate the Baker Act population to ensure no one falls through the cracks? | >> | <b>No</b> , not until further evaluation of how existing case management capacity is utilized.  |
| 4 | Should we <b>consolidate all our contracts and funding</b> into fewer providers?   | >> | <b>Potentially yes</b> , once a better view of system performance is achieved.  |
| 5 | Should we be doing more as a system of care to <b>combat the opioid crisis</b> ?   | >> | <b>Potentially yes</b> , building on the County's existing efforts and with improved models of coordinated access and management of system performance. |





# Recommendations for BCC consideration

Priority	Recommendation
Foundational Investments	<b>1</b> Establish a <b>systemic performance management</b> approach collectively with all funders and contractual <b>Minimum Data Set (MDS)</b> requirement for all providers
	<b>2</b> Establish a robust <b>Coordinated Access Model</b> with a 1-800 number, standardized screening, triage and scheduling practices, and evaluation of the current provider systems
Re-evaluated Investments	<b>3</b> Explore the County's <b>receiving and diversion needs in terms of capacity</b> by optimizing utilization of current bed capacity or contracting for additional flex beds within its existing provider network, as appropriately evidenced by data-driven performance management and coordinated access
	<b>4</b> Evaluate, enhance and/or expand existing <b>case management services</b> —specifically through focusing on the individual's strengths, promoting the use of informal supportive networks, and utilizing either transitional or long-term case management
	<b>5</b> Consolidate the County's services into <b>fewer performance-based contracts</b> and collaborate with funding partners to identify ways to reduce silos of care based upon established performance management and coordinated access capabilities

# Project approach

**It is important to note that KPMG did not conduct a review or analysis of the third-party providers and their delivery of services. Our findings reflect the perspectives of a broad range of stakeholders interviewed.**

Over a 12-week period, the KPMG team conducted the following activities:

-  Interviews
-  Focus Groups
-  Survey
-  Validation Workshops
-  Financial Review
-  Documentation Review
-  Research/Benchmarking

List of stakeholders/organizations interviewed				
1	211 Tampa Bay Cares	18	Eckerd Connects	35 NAMI Pinellas
2	Agency for Community Treatment	19	Emergency Medical Services	36 Northside Hospital
3	ALPHA House of Pinellas County	20	Faith and Action for Strength Together (FAST)	37 Operation PAR
4	Bay Pines Veterans Affairs	21	Family Resources	38 PCSO Jail Health Services
5	Baycare Behavioral Health	22	Florida Department of Children and Families	39 PCSO Safe Harbor
6	Board of County Commissioners	23	Florida Department of Health	40 Personal Enrichment Through Mental Health Services
7	Boley Centers	24	Foundation for Healthy St. Petersburg	41 Pinellas County Schools
8	Catholic Charities of the Diocese of St. Petersburg	25	Gulfcoast Jewish Family Services	42 Pinellas County Sheriff's Office (PSCO)
9	Central Florida Behavioral Health Network (CFBHN)	26	HCA Largo Medical Center	43 Pinellas Integrated Care Alliance (PICA) Team
10	Circuit Court Judges	27	Homeless Empowerment Program	44 Pinellas Public Defender
11	City of St. Petersburg	28	Homeless Leadership Alliance	45 Religious Community Services
12	Clearwater Police Department	29	Judiciary	46 Society of Saint Vincent De Paul
13	Community Action Stops Abuse (CASA)	30	Juvenile Welfare Board	47 Suncoast Center
14	Community Health Centers of Pinellas	31	Local and Statewide Baker Act Experts	48 Vincent House
15	County Administration	32	Magistrates	49 Westcare-Gulfcoast of Florida
16	Daystar Life Center	33	Manatee County	50 Windmoor Healthcare
17	Directions for Living	34	Medical Examiner's Office	



# Key findings on the current behavioral health system

**KPMG identified five core findings which guided the option development for the County's consideration:**

**Finding 1:** Primary entry into behavioral health services is through crisis care settings.

**Finding 2:** Silos persist such that the behavioral health system functions more as a set of programs than a coordinated system of care.

**Finding 3:** There is a lack of data-driven transparency and accountability on how well behavioral health providers and services are performing collectively, and in some cases individually.

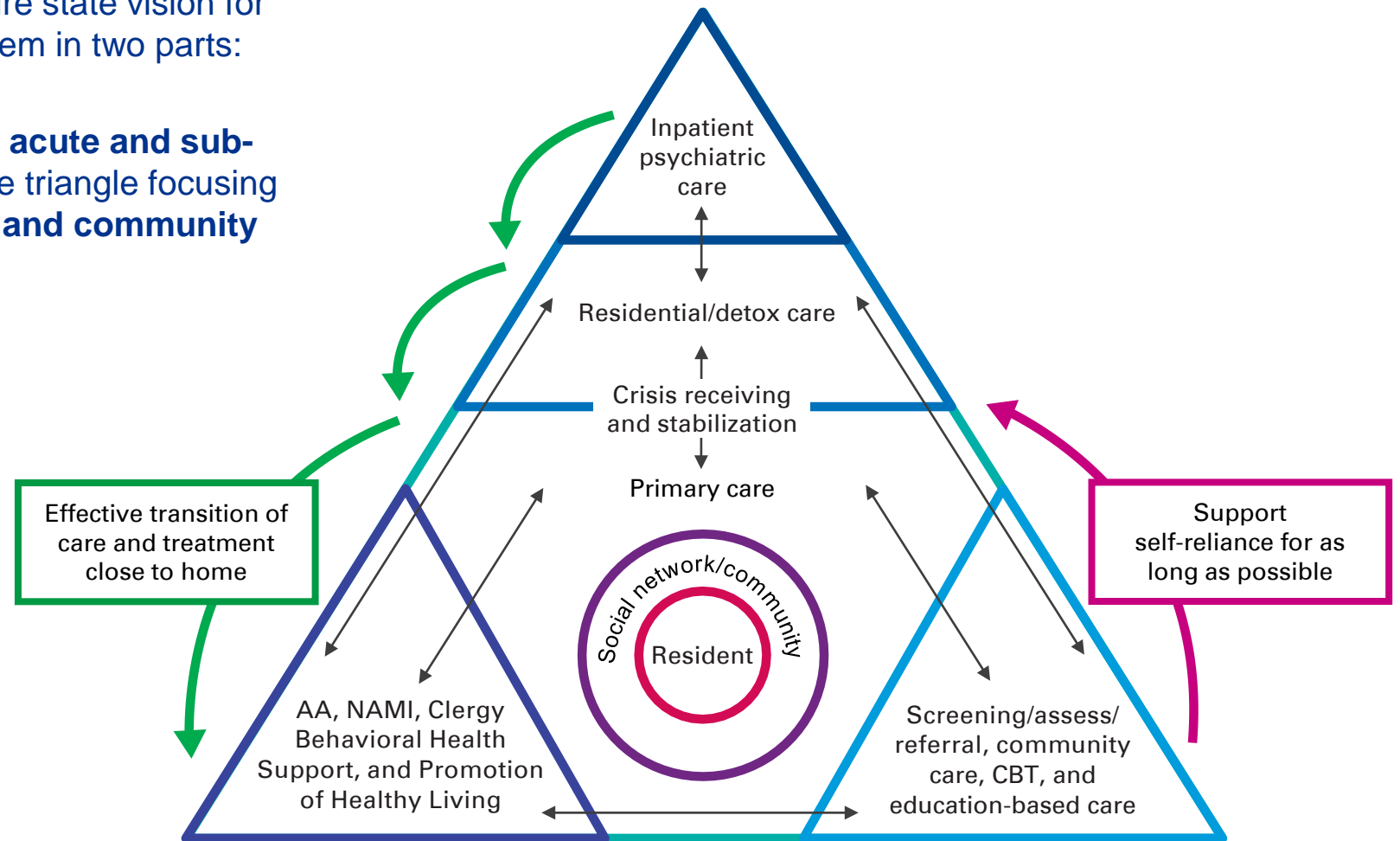
**Finding 4:** Funding structures and reporting requirements are silo'd causing lack the flexibility and transparency to follow patients through the system of care.

**Finding 5:** The unique geographic dimensions and population density of the County limit the practicality of one central receiving facility to effectively serve a fast-growing population.

# Future state vision for the behavioral health system

The figure below visualizes the future state vision for the County's behavioral health system in two parts:

The top of the triangle representing **acute and sub-acute services**, and the base of the triangle focusing on **prevention, early intervention and community treatment models**.



# Overview of options

KPMG developed a set of strategic options across six categories for change, at both the System Management and Service Delivery levels. We recommend the County and its stakeholders consider these options from left-to-right, enhancing Performance and Coordination before considering Funding or Diversion.

System Management

## Performance Management

PM-1	Develop County Minimum Data Set
PM-2	Develop System-wide Minimum Data Set
PM-3	Integrate County Minimum Data Set with Funding

## Governance

G-1	Enable Performance-Based Contracting at County Level
G-2	Engage a Managed Entity at County Level and/or State

## Funding

F-1	Consolidate Funding Across County & State Sources
F-2	Hybridize Funding Across County & State Sources

Service Delivery

## Coordination

C-1	Establish a County & Provider-Managed Model of Coordinated Access for Consumers
C-2	Establish a Managed Entity & Provider-Managed Model of Coordinated Access

## Prevention & Early Intervention

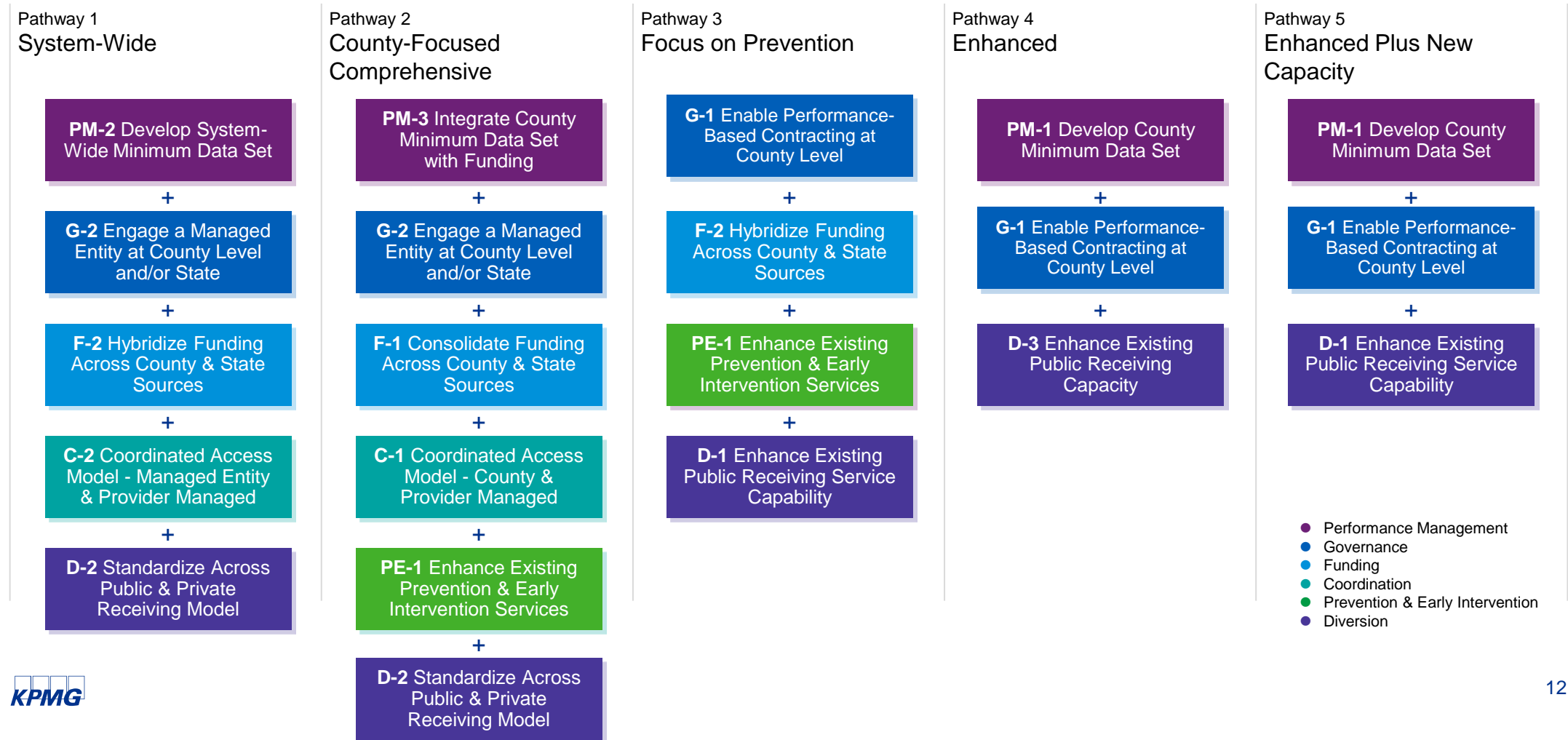
PE-1	Enhance Existing Prevention & Early Intervention Services
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## Diversion

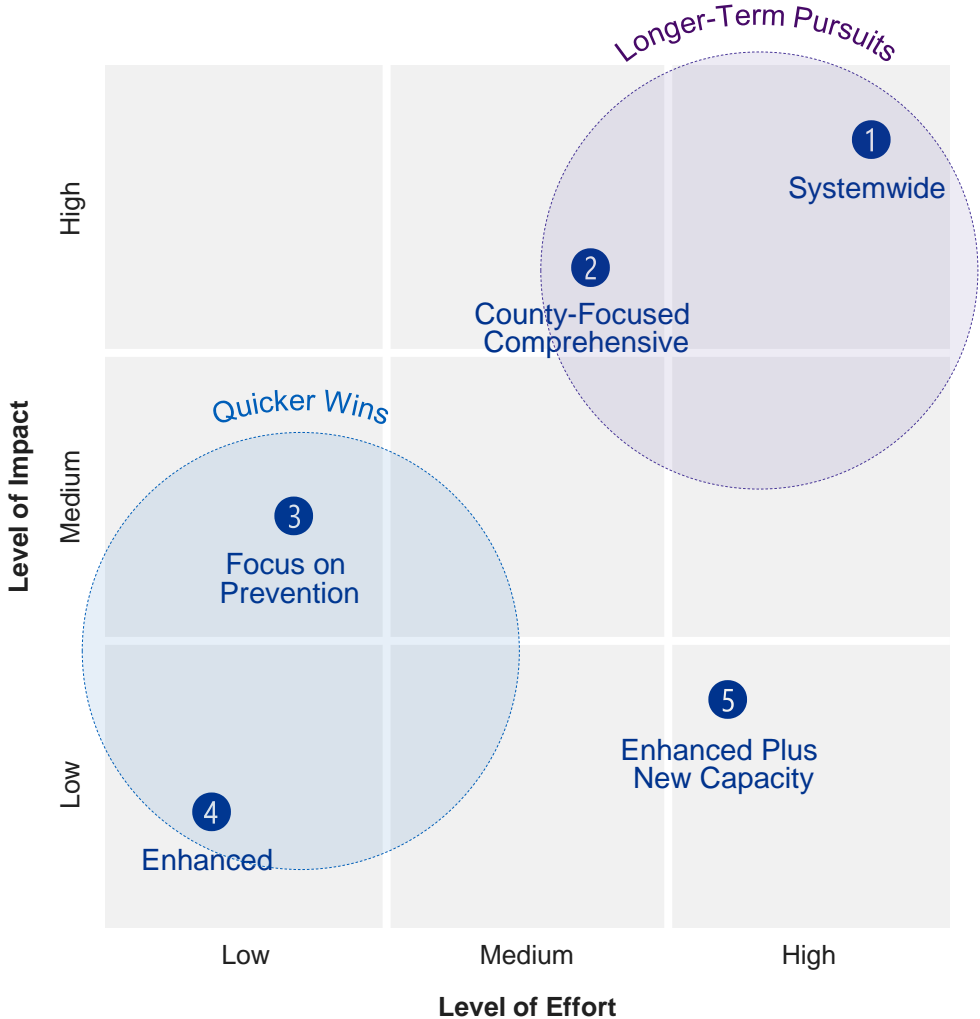
D-1	Enhance Existing Public Receiving Service Capability
D-2	Standardize Across Public & Private Receiving Model
D-3	Enhance Existing Public Receiving Capacity

# Overview of implementation pathways

The five pathways below integrate the strategic options into logical groups based on the inter-dependencies and represent significant multi-year efforts.



# Comparison of implementation pathways

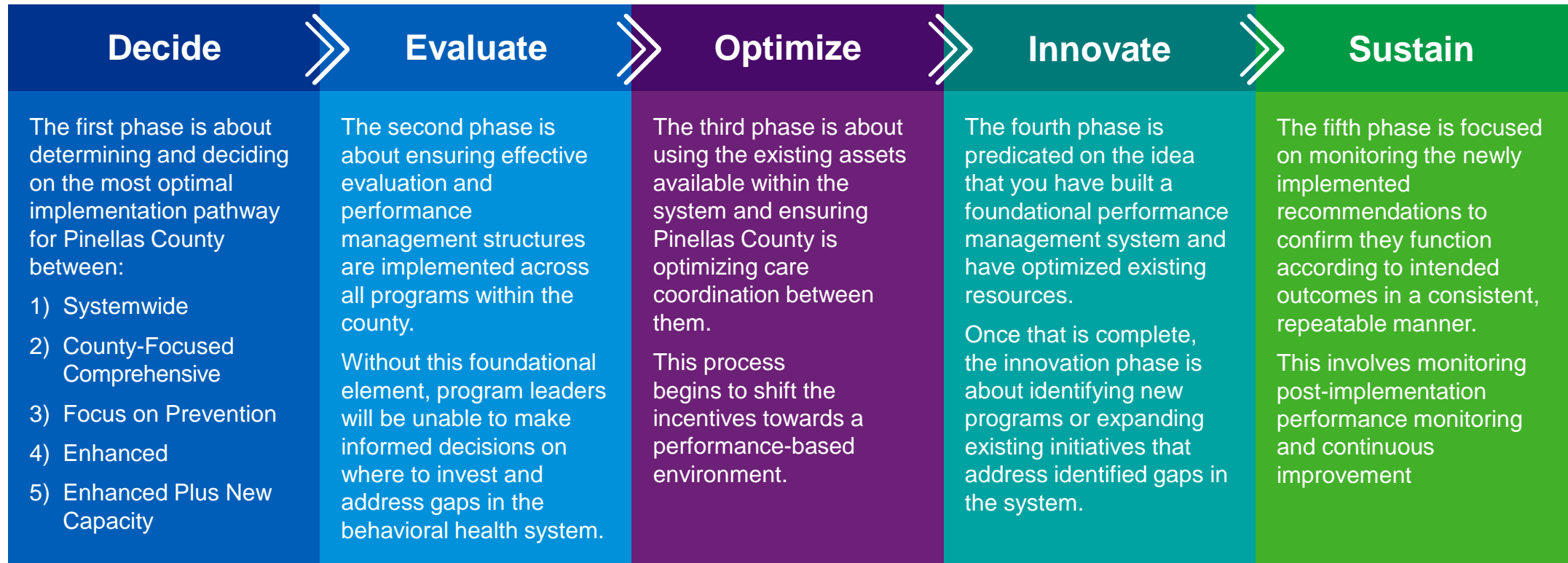


	Pathway 1 Systemwide	Pathway 2 County-Focused Comprehensive	Pathway 3 Focus on Prevention	Pathway 4 Enhanced	Pathway 5 Enhanced Plus New Capacity
Level of Impact	High	High	Medium	Low	Low
Level of Effort	High	Medium	Low	Low	High
Level of Investment	\$2–3M (>20% current budget)	\$2–3M (>20% of current budget)	\$500–1M (>10% current budget)	\$500K to \$1M (<10% current budget)	\$3–10 M (>30% current budget)



# Overview of implementation phases

Regardless of the County's selected pathway, KPMG recommends the following sequence of change to provide for a period of evaluation, optimization of existing resources, and incremental identification of investment thereafter in enhanced services and/or expanded capacity.



# Summary and next steps

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1

Establish a **systemic performance management approach** in terms of access, quality, capacity, productivity, and outcomes—grounded on a **Minimum Data Set (MDS)** across all providers, allowing for benchmarking comparison and trend analysis.

This requires establishing a contractual MDS requirement for all providers arising from collective development of an MDS with behavioral health funders within the County.

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2

Establish a robust **Coordinated Access Model** that allows for increased transparency in how clients, families, caregivers, and professionals can access the right services within the system.

This requires various enabling elements including a **1-800 number; standardized screening, triage and scheduling practices; and an evaluation of the current systems in place by providers** to ensure interoperability and exchange of information to allow for a consolidated view of consumer demand, level of need, available capacity, and access to care.

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# Questions?