

BHC NEWS

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Accreditation and certification

Accreditation improves treatment and services; boosts referrals for addiction treatment programs

September is [Recovery Month](#) and [Tracy Griffin Collander](#), executive director, Behavioral Health Care Accreditation program, discusses current trends in the addictions treatment field and how accreditation helps improve treatment and services, and boost referral sources. Collander was previously an administrator at a Joint Commission accredited residential and outpatient addiction treatment center.



What are some current trends in the addiction treatment field for which providers should be prepared? There are a number of trends that will dramatically affect addiction treatment providers in the coming months. The main ones are:

- Coverage expansion because the [Affordable Care Act](#) and the [Mental Health Parity and Addiction Equity Act](#) are allowing more people to seek treatment.
- The explosion of technology-based treatment that is making recovery support available through web-based and app-based programs.
- Increased demand by consumers, funders and payers for successful, evidence-based treatment and outcomes measurements.
- The move by addiction treatment providers to convert to health homes to better address co-occurring physical health needs of the individuals they serve.

How does Joint Commission accreditation help addiction treatment providers deliver effective care? The Joint Commission accredits the entire organization, not just the program. This focuses the whole organization on continuous quality improvement. Accreditation establishes a framework for effective treatment, for ensuring the competency of staff, and for maintaining a safe environment; and a recovery-oriented philosophy and approach are embedded in all the requirements. In addition, [research](#) has shown that accredited addiction treatment programs have higher organizational performance.

How does Joint Commission accreditation help addiction treatment providers establish referral relationships with health care providers and payers? Many insurers, state health departments, and health care providers are familiar with Joint Commission requirements. In fact, many health care providers are Joint Commission accredited. Accreditation establishes credibility by providing evidence of quality in the provision of care,

treatment and services and in the competency of staff. It also provides evidence and validation of commitment to quality and safety by requiring outcomes measurement.

How can the public and referral sources find out if an addiction treatment provider is Joint Commission accredited? All Joint Commission accredited organizations are listed on the [Quality Check](#) website.

Standards Q&A: Requirements for licensed independent practitioners

Q: Did the requirements for licensed independent practitioners change in the 2015 *Comprehensive Accreditation Manual for Behavioral Health Care (CAMBHC)*?

A: The requirements didn't change, but the newly revised [Human Resources Management](#) (formerly Human Resources) chapter of the *CAMBHC* combines the requirements from two separate sets of requirements – those for licensed independent practitioners and those for all other licensed, registered and certified staff – into one set of requirements. The standards still require an organization to:

- Determine the qualifications that staff members should have in order to provide quality care, treatment or services. These qualifications are required for the job descriptions for **all** positions.
- Conduct primary source verification for all licensed, registered and certified practitioners.

The revised HRM chapter will go into effect January 1, 2015.

News

Prepare now for Excellence in Mental Health Act demonstration project

Behavioral health care organizations should review the services they offer and contact their state legislators in preparation for new opportunities coming because of the recently approved [Excellence in Mental Health Act](#). Provisions of the legislation include:

- Establishes a federal status for mental health and addiction treatment providers by creating criteria for Certified Community Behavioral Health Clinics (CCBHCs) to serve individuals with serious mental illnesses and substance use disorders.
- CCBHCs must provide intensive, person-centered, multidisciplinary, evidence-based screening, assessment, diagnostics, treatment, prevention and wellness services.
- Organizations that meet CCBHC criteria may receive an enhanced Medicaid payment rate under a “prospective payment system” (PPS) based on the cost of providing services.
- Eight states will be selected to participate in the two-year demonstration program.
- By September 1, 2015, the federal government will release CCBHC criteria. States can then apply for a share of \$25 million to certify CCBHCs and complete an application to become a demonstration state.



“Behavioral health organizations shouldn't wait until 2015 to start getting ready,” says Linda Rosenberg, president and CEO, [National Council for Behavioral Health](#). She advises organizations to compare their services to those required in the legislation and decide if they need to expand. “Evaluate your relationships with other providers in your community, such as Federally Qualified Health Centers and hospitals, to make sure you can establish partnerships. You should also reach out to state legislators and state agency officials and talk to them about the importance of this program and why your state should apply to be a demonstration state.”

September is Recovery Month



In its 25th year, Recovery Month promotes the benefits of prevention, treatment and recovery for mental and substance use disorders. This year's theme, “[Join the Voices for Recovery: Speak Up, Reach Out](#),” encourages people to openly speak up about mental and substance use disorders and the reality of recovery, and promotes ways individuals can recognize behavioral health issues and reach out for help. Sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), Recovery Month spreads the positive

message that: behavioral health is essential to overall health; prevention works; treatment is effective; and people can and do recover. In addition, The Joint Commission has a free Speak Up campaign, "[Speak Up: What you should know about adult depression](#)," to help people become better informed about the common warning signs of adult depression, how to get the most out of treatments for depression, and advice for how to speak up if they or a loved one needs help.

AFR names Marx 2014 Recovery Advocate of the Year

Megan Marx, M.P.A., associate director, Behavioral Health Care Accreditation, has been named the 2014 Recovery Advocate of the Year by [Advocates for Recovery](#) (AFR). Marx leads the Colorado Coalition for Parity, a group of organizations that advocate for the implementation and regulation of the Mental Health Parity and Addiction Equity Act of 2008.



RPI corner

Q. What RPI tools can help my team reach a decision?

A. An important part of the facilitator's role is getting the team to reach agreement. There are many ways to do this, including different types of voting, ranking, negotiation and consensus.

Voting and other methods

- "Dot voting" uses colored, adhesive dots that are placed on choices listed on a flip chart. Team members vote by placing a dot beside their choice. After everyone has voted, the dots are counted and the majority wins.
 - "Multi-voting" is the same idea, except participants are given several dots that they can use for different choices or all on one choice.
 - "Passion voting" is another way to dot vote by giving people different colored dots. One color, such as red, is labeled a "passion" color. This indicates a choice that someone is very passionate about.
- Full ranking, where the highest score wins.
- Delegation, where someone, such as the team leader, just decides.
- Negotiation and compromise among team members.

Consensus using Fist to Five

Agreement can be reached through consensus, using a concept called "[Fist to Five](#)." Consensus means agreeing to proceed without hidden reservations. It does not mean that everyone agrees. It does mean, however, that everyone agrees to implement and actively support the decision. Fist to Five is a way to reach consensus where everyone participates and you look for everyone to give three fingers or better. For instance if you want to approve the ground rules, ask meeting participants to indicate support by using their fingers.



- 5 fingers = Best
- 4 fingers = Good
- 3 fingers = Okay
- 2 fingers = Needs more discussion
- 1 finger = Not good
- Fist = Totally against or broken

Remember, you're not looking for an average. Everyone's vote counts. If you get less than three fingers from anyone, discuss the point of contention and then revote.

Next issue: Team development

Resources

New: Standards BoosterPak on waived testing requirements available on the extranet

A new [Standards BoosterPak™](#) on waived testing is available on The Joint Commission Connect™ extranet. The BoosterPak, applicable only to accredited behavioral health care organizations in which waived testing is performed, provides regulatory requirements, implementation expectations, strategies for compliance, and links to additional resources. Waived testing is the most common regulated testing performed at the point of care, treatment or services. Most often, waived testing involves “dipstick testing” of urine or blood for drugs or pregnancy. By law waived, tests have a low incidence of error, however, the results are used to decide whether further testing is warranted.

Join us at the 2014 Behavioral Health Care Conference

The Joint Commission’s [2014 Behavioral Health Care Conference](#) to be held October 15-16, in Rosemont, Illinois, will focus on integrated health care, person-centered care and how accreditation can position your organization to provide state-of-the-art care. New this year is an "Accreditation Champion" track to help individuals become familiar with the accreditation and survey process.

New on the web

- **New:** [Facts about Opioid Treatment Program \(OTP\) accreditation](#)
- **Register for free webinars:**
 - Nov. 17: [Strategies for a Successful Survey](#)
 - Dec. 3: [Best Practices and New Standards in Medication-Assisted Opioid Treatment](#)

See you there!

BHC staff members will be at the following meetings:

- Sept. 25-28, Colorado Behavioral Health Association, Breckenridge, Colorado
- Oct. 2, Ohio Council of Behavioral Health and Family Services Providers, Columbus, Ohio
- Oct. 16, New Hampshire Providers Association, Concord, New Hampshire
- Oct. 15, Alliance for Children and Family Services, Pittsburgh, Pennsylvania
- Oct. 29-30, Moments of Change, Palm Beach, Florida
- Nov. 3, Mid-Atlantic Behavioral Health Conference, Annapolis, Maryland



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