What have we learned about service experiences, quality, access, and utilization?

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Overview of the presentation

- From the national literature
  - What are the major themes?
- From the national evaluation of the federal systems of care program
  - What have we learned?
- Reflections...
  - What do we know? What don’t we know? What research is most needed?

The national literature:
Search terms and areas of review

- Databases reviewed
  - MedLine
  - PsycInfo
- Search terms
  - Children [or] youth +
  - Mental Health +
  - Services [or] treatment +
  - Utilization, intensity, access, outcomes

Services, access, utilization, and outcomes
Themes from the national literature

- Utilization rates and service mix profiles for different groups
  - Age
  - Race
  - Diagnosis / problem area / degree of impairment
  - Familial factors
  - Special populations
    - Rural
    - Experience of past trauma

Services, access, utilization, and outcomes
Themes from the national literature

- Barriers to access/Factors related to drop-out
  - Stressors associated with treatment
  - Treatment irrelevance
  - Poor relationship with therapist
  - Poverty, single parent status and stress
  - Concrete obstacles: time, transportation, child care, competing priorities
  - Previous negative experiences with mental health or institutions
- Etiological beliefs (what is causing the problem?)
- Changes in residential placement
- Inconsistent primary care

Services, access, utilization, and outcomes
Themes from the national literature

- Utilization rates and service mix profiles for different groups
  - Material resources
  - Type of insurance
  - Access to primary care
  - System involvement
    - Youths in foster care or involved in child welfare
    - Youths involved in Juvenile justice
Services, access, utilization, and outcomes
Themes from the national literature
- Impact of specific service delivery models on utilization
  - Case management, wraparound process
  - Evaluation of specific programs to increase retention/access/utilization
- Impact of major policy changes and shifts on utilization
  - E.g., Medicaid Managed Care
  - Implementation of system outcomes monitoring

Services, access, utilization, and outcomes
Themes from the national literature
- Service characteristics and association with outcomes
  - Intensity
  - Services mix / Match to needs
  - Indicators of quality
    - e.g., parental involvement, satisfaction, therapeutic alliance
  - Fidelity to specific models
- Provider organization characteristics and outcomes
  - E.g., Culture and climate

Services, access, utilization, and outcomes
Themes from the national literature
- Costs studies
  - Costs of unmet service needs/unaddressed mental health problems, e.g.
    - Depression
    - Conduct disorder in youth
    - Social problems related to unaddressed MH problems
  - Costs related to achieving successful outcome

Services, access, utilization, and outcomes
Summary of variables
Adapted from Brannan, Heflinger, & Foster, 2003

Services, access, utilization, and outcomes
Contributions of system of care research
- Nature of services delivered in SOC
  - Intensity, Access, Mix of services
  - Appropriateness to needs
  - Types of services (traditional, innovative, restrictive; EBP knowledge and use)
- Costs of services
  - Costs of MH services offset by reductions in costs for partner systems
  - Role of service utilization in achieving outcomes

Summary of findings
- We have learned much about child and family factors that predict service utilization
- We have learned some about system factors that influence access, utilization, and cost
- We have learned much less about how to purposefully engineer service systems to
  - Overcome disparities and barriers
  - Achieve positive outcomes
- We have learned less about service factors and their relationship to outcomes
  - How do we achieve good “fit” to youth and family needs?
  - What represents service “quality”?
What more might we do within the national evaluation?

- Which families benefit from services of different types
  - Make predictions and test hypotheses rather than rely on post-hoc correlational studies
- The role of other service systems
  - Primary care, schools, child welfare, juvenile justice
- More investigation of role of service utilization and outcomes
  - How do short-term health and mental health improvement trajectories influence long-term utilization and costs?

What are our biggest priorities?

- Need to get beyond analysis of existing administrative data
  - What do families and youth say they need?
  - What do they actually get?
  - What do they report are the barriers?
- What represents “quality”? What leads to better outcomes?
  - This is not assessed via administrative and survey data
  - In-depth investigation of organizational factors and provider activities
  - Better measurement of EBP utilization

The ultimate goal…

- To purposefully test hypotheses about factors that will lead to access, quality of care, better “fit” to needs, and outcomes
  - Addition of delivery models (family support, wraparound)
  - Systematic intervention with provider organizations (leadership, organizational climate, support to EBPs)
  - System-level monitoring of utilization, outcomes, adherence, quality
- We need to start taking some leaps…

Across SOC communities (and comparison communities), what is driving service mix, utilization, and access?

- Systems involved/degree of systems integration?
- Adherence to SOC principles?
- Payor system?
- Use of special models (Family support, wraparound)