CLEARPOINT REPORTING: HOW TO AVOID COMMON MISTAKES

ERIE COUNTY DEPARTMENT OF MENTAL HEALTH

APRIL 17, 2023 AND APRIL 19, 2023

BACKGROUND

- ECDMH launched the use of ClearPoint as our reporting system for contract agencies in 2021

- We now have 2 years of data and experience using the system

- There continues to be some issues with reporting and understanding what each of the measures mean

- The purpose of this presentation is to address many of the common mistakes and provide you with a better understanding of how to avoid errors and more efficiently navigate the system

WHY THIS IS IMPORTANT

- How we use the data
  - Assess performance
  - Understand what's happening in the programs
  - Analysis to understand demographics and impact of programs and groupings of programs
- TIME!!
  - If you get it right the first time, it saves us time and it saves you time!

CONTENT OF THIS TRAINING

- Navigating ClearPoint

- Measures

- Saving and Submitting

- Next Steps

- Questions

NAVIGATING CLEARPOINT

IMPORTANT PAGES IN CLEARPOINT

- Agency Page

- Program Information Page

- Performance Report Tracker Page

- Performance Report Page

- Graphs and Tables Page

AGENCY PAGE

HOW TO GET THERE

- In the dark panel on the left side of the page, click on the name of your agency

- If the dark panel is not showing up, click on the ☰ icon at the top left of the page.

WHAT'S THERE?

- Link to Reports

- Link to Performance Report Tracker

- Owners

- Data Status

- Approval Status

- Due Date

AGENCY PAGE

Opens up the dark panel

Date Selector

Click on the name of the agency to open this page

DATE SELECTOR

You will need to select a date to make sure you're in the proper report or timeframe for reporting. You can use the arrows on either side of the date box to find the correct timeframe OR you can click on the date field and this pop-up will appear and you can select the timeframe here.

Click here to open the date pop-up
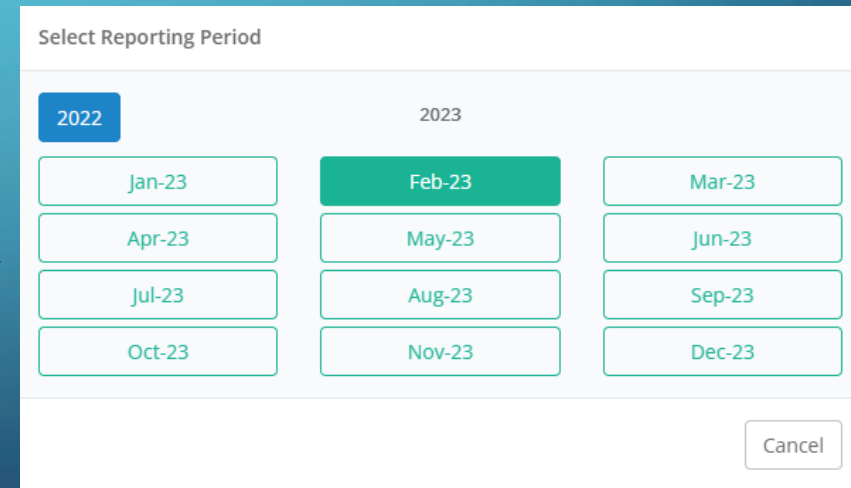
PROGRAM INFORMATION PAGE

HOW TO GET THERE

- In the dark panel select the program name

OR

- Click Scorecards at the top of the page and select the program from the drop-down list

WHAT'S THERE?

- Program description
- CFR Definition and CFR Code
- CFR Units of Service
- Link to the Performance Report
- Scopes of Service for the program
- Graphs and tables

PROGRAM INFORMATION PAGE

PERFORMANCE REPORT TRACKER

HOW TO GET THERE

- From Program Information page OR Performance Report page, click on Deliverables at the top of the page and select Performance Report Tracker

WHAT'S THERE?

- Owners and Contract Coordinator
- Data and Approval Status
- Due Date
- Reason for Rejection and Correction Needed
- Report Comments
- Report

PERFORMANCE REPORT TRACKER

PERFORMANCE REPORT PAGE

HOW TO GET THERE

- On Agency page select Performance Report for selected program

- On Program Information page select Performance Report

WHAT'S THERE?

- List of measures and definitions

- Fields for data by Report Period

PERFORMANCE REPORT PAGE:
THE MEASURES
COMMON ERRORS AND THINGS TO REMEMBER

THE MEASURES

- Not every program has all of these measures, but most do

- If a measure does not apply to your particular program, other measures we will be talking about probably do

- Please hang in through the entirety of this presentation – ultimately it will help you and us save time and energy – which is good for all of us!

ADMISSIONS

- Definition: Count of enrollments into the program during report period

- This is a count of new clients enrolled in the selected program.

UNIQUE CLIENTS SERVED

Definition: Count of unduplicated clients served year to date (all enrolled)

Key words in this definition:

Unduplicated – each person should only be counted one time during the year, even if they leave the program or service and then return later in a given year.

Year to Date – This is an unduplicated count of individuals served year-to-date. You will need to enter the Q1 data for that year. This would include all of the people you provided this service to in Q1 (and may include some that you served during Q4 of the previous year if they have remained in services.) For Q2, Q3 and Q4 you can just add the number of new admissions to the program. This would hold as long as someone does not return to services in that particular year (for example is Joe Smith leaves services in Q2 and returns in Q4, you would not include him again in the Unique Clients served YTD because he was already counted earlier in the year).

DEMOGRAPHICS: RACE, ETHNICITY, GENDER & AGE

- Definition: Count of unduplicated clients served year to date (all enrolled) by self-identified race/ethnicity/gender/age

- During preliminary review of the data we noticed that in 2021 there were higher numbers of individuals in the "Declined to Answer" response

- In 2022 we saw the percentage of individuals reported as Declined to Answer decrease

- In 2023 we hope to see Declined to Answer go down even more as agencies improve their reporting and data collection

DEMOGRAPHICS: RACE, ETHNICITY, GENDER & AGE EASY CHECK

Data Status	Measures	Definition	Series Name	Report Period			
				Q1-21	Q2-21	Q3-21	Q4-21
	Unique Clients Served	Count of unduplicated clients served year to date (all enrolled)	Actual	36	53	80	111
	Race	Count of unduplicated clients served year to date (all enrolled) by self-identified race	Total	36	53	80	111
			White	10	15	24	33
			Black/African American	18	25	37	49
			Native American or Alaska Native	0	0	0	0
			Asian	0	0	0	1
			Native Hawaiian or Other Pacific Islander	0	0	0	0
			Two or More Races	8	13	19	28
			Declined to Answer	0	0	0	0

THESE TWO NUMBERS MUST MATCH FOR ALL DEMOGRAPHIC CATEGORIES. IF THEY DON'T MATCH YOUR REPORT WILL BE REJECTED.

POSITIVE OUTCOME

- Definition: The Positive Outcome is different for different types of programs

- These were developed in consultation with agency and program staff and reflect a primary goal of the program

- Please read the definition for each of the Positive Outcomes in order to provide the requested data

POSITIVE OUTCOME BY RACE/ETHNICITY

- Definition: This is the number of Positive Outcomes by self identified race and ethnicity

- This information will help us identify possible health disparities within agencies, program types, etc.

- We encourage agencies to be looking at this information

POSITIVE OUTCOME BY RACE/ETHNICITY EASY CHECK

Measures	Definition	Series Name	Report Period			
			Q1-21	Q2-21	Q3-21	Q4-21
Positive Outcome	Number of individuals (unduplicated) receiving at least one favorable benefits disposition year to date	Actual	57	115	195	282

Measures	Definition	Series Name	Report Period			
			Q1-21	Q2-21	Q3-21	Q4-21
Positive Outcome by Race	Number with positive outcome by self identified race year to date	Total	57	115	195	282
		White	46	86	146	214
		Black/African American	8	21	36	52
		Native American or Alaska Native	0	0	0	0
		Asian	0	0	0	0
		Native Hawaiian or Other Pacific Islander	0	0	0	0
		Two or More	0	0	3	3

THESE TWO NUMBERS MUST MATCH FOR ALL DEMOGRAPHIC CATEGORIES. IF THEY DON'T MATCH YOUR REPORT WILL BE REJECTED.

UNITS OF SERVICE

- Definition: Unit of service as defined in the CFR

- For each program with this measure, the CFR Units of Service is on the Program Information Page. You can also find this information on the NYS OMH website at https://omh.ny.gov/omhweb/finance/main.htm, select CFR Manuals and these are in the Appendices (you can search by Program Code)

- Units of Service are specific to each Program Code

- Some Examples include: Patient Days, Resident Day, Number of Contacts, Staff Hours, Service Days – some do not have CFR Units of Service

EXPENSES

- Definition: Total Expenses for this program in the report period

- This field should only include ECDMH contracted funds for this service

- Key words:

    In the report period

FTE VACANCIES AND FUNDED DIRECT SERVICE FTES

- Definitions:
  - FTE Vacancies: Number of FTE direct service vacancies funded through contract with ECDMH at the end of the report period
  - Funded Direct Service FTEs: Number of FTE direct service positions funded through contract with ECDMH at the end of the report period

  FTE = Full Time Equivalent (Full time position is 1.0 FTE. If you have a 40 hour work week, a 20 hour per week person would be 0.5 FTE)

  KEY WORDS:

  Funded through contract with ECDMH
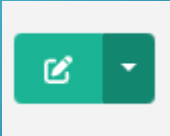
  At the end of the report period

FILL IN ALL OF THE FIELDS!

- You should enter data into EVERY field!!

- If a value is zero, enter a zero – don't just leave it blank

WORDS TO PAY ATTENTION TO

- Year to Date (YTD)

- During or In the Report Period

- At the End of the Report Period – point in time measure

SAVE YOUR WORK!!!

- In the top right corner of any page there is an icon that looks like this:

- If you make any changes to a page (enter data), this symbol will change to:

- To SAVE, click on the green check mark.

- The page will refresh and you will be able to see your changes.

- If you do not save your work, you will lose your work.

Click the GREEN CHECK MARK to SAVE!!

SUBMITTING

Once you have entered and saved all your data in a report and you are ready to submit:

- Double click anywhere in the white column under Data Status.
- This will open a drop box.
- Select Submitted.
- Click the green check mark to save.

This is the only way we know you've completed your report and that it's ready for us to review!!

Data Status	Measures	Definition	Series Name
AGENCY			
Cazenovia Recovery			
Double click anywhere in this box. Select Submitted in the dropdown Click the green check mark to save. Now ECDMH knows this one is ready for review!	Admissions	Count of enrollments into the program during report period	Actual
	Discharges	The number of discharges from the program during the report period	Actual
	Unique Clients Served	Count of unduplicated clients served year to date (all enrolled)	Actual

DUE DATES

- Each report has a DUE DATE – once we approve a report we update the DUE DATE for the next required submission.

- Please mark your calendars with the due date so you can submit your reports on time. Reports are due within 30 days after the end of every quarter except where otherwise noted i.e. Clinic, PROS, ACT & School Programs.

- We should not have to remind you by contacting you about overdue reports. This is required as a part of your contract.

- Again, if you don't change the Data Status to Submitted, we will not know it's ready for ECDMH review.
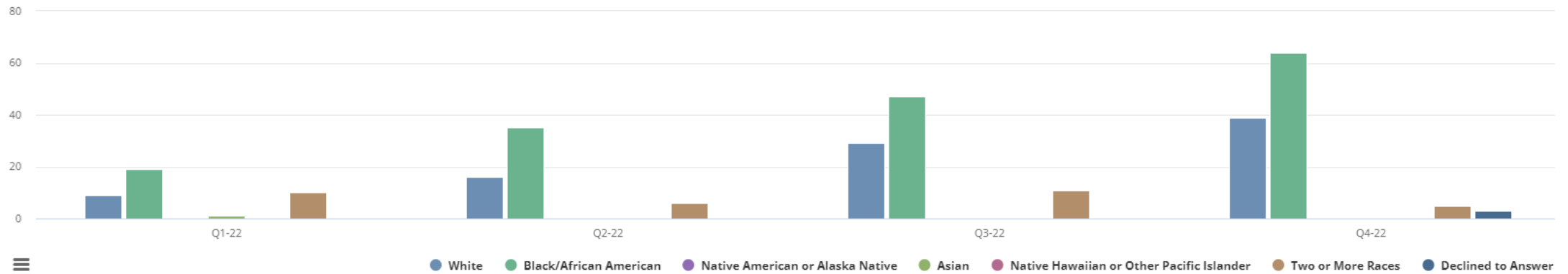
TABLES AND GRAPHS

- Tables and graphs have been built into the system for most measures

- To access the tables and graphs for each measure, click on the text in the Measures column that you want to look at:
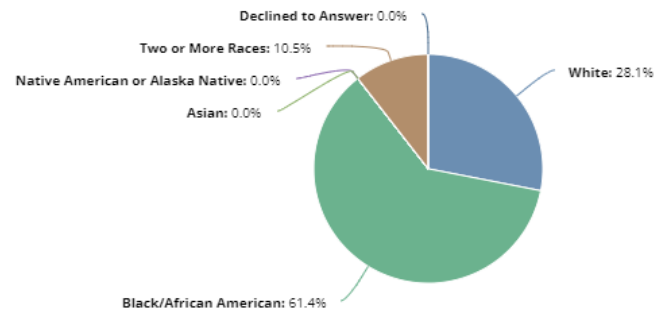
TABLES AND GRAPHS

NEXT STEPS FOR ECDMH

- We've learned a lot in the past 2 years – thank you for working with us to improve the system

- ECDMH is going to review the data we are asking for to try and refine the measures and definitions, eliminate unnecessary measures, add calculated fields as possible,etc.

- ECDMH is going to conduct more systematic data analysis so we can use the data we have with our providers and work towards system improvements

- We will continue to take your feedback and input about ClearPoint to make it more user friendly and easier to navigate.

YOUR FEEDBACK IS IMPORTANT!!

- The system continues to evolve, and we are still finding opportunities to make corrections and improvements

- Please email us if there are:

  - Errors in calculations

  - Issues or confusion with definitions of measures

  - Changes that could be made to help you (ex. Bolding some words, clarification of definitions, etc.)

  - Suggestions for improvements or reports you are interested in seeing

QUESTIONS AND FEEDBACK

- Contact your assigned Contract Coordinator and/or Amy Rockwood
  - Lynn Grieco – Lynn.Grieco@erie.gov
  - Tara Karoleski – Tara.Karoleski@erie.gov
  - Cathleen Larson – Cathleen.Larson@erie.gov
  - Amy Rockwood – Amy.Rockwood@erie.gov

QUESTIONS?