

The Colorado Office of Behavioral Health:



COLORADO
Department of
Human Services

2015 Behavioral Health Equity Report

EXECUTIVE SUMMARY

PROJECT BACKGROUND

In early 2014, OBH initiated a 15 month project to produce an exploratory behavioral health equity report for the state of Colorado. The project was funded by OBH in recognition of:

- Existing disparities in access to behavioral health treatment, as well as treatment retention and outcomes, across populations
- A need for information regarding culturally responsive best practices for engaging, retaining and serving clients across cultural backgrounds

OBH contracted with OMNI Institute, a Denver-based, non-profit social science research firm, to lead this effort.

KEY PROJECT GOALS

- Broaden understanding of behavioral health equity at the national level and within Colorado, through review of national data related to equity and a preliminary exploration of Colorado mental health and substance abuse service data
- Identify potential responses to behavioral health disparities based on examination of literature in the field, and local information sources including provider and consumer input and OBH policy assessments

USES OF THE REPORT AND NEXT STEPS

- Generate dialogue among key behavioral health systems and service providers to: 1) promote transparency and open discourse about equity issues; and 2) identify appropriate action steps
- Identify priorities for OBH action at the organizational policy level, and in support of providers statewide
- Enhance the quality of ongoing data collection efforts to monitor disparities over time
- Inform related policy change efforts

CORE PROJECT COMPONENTS

For more information, please contact:

Jane Flournoy, MA, LMFT, LPC, CAC III Manager,
Culturally Informed and Inclusive Programs
Colorado Office of Behavioral Health
p. 303.866.7403
jane.flournoy@state.co.us

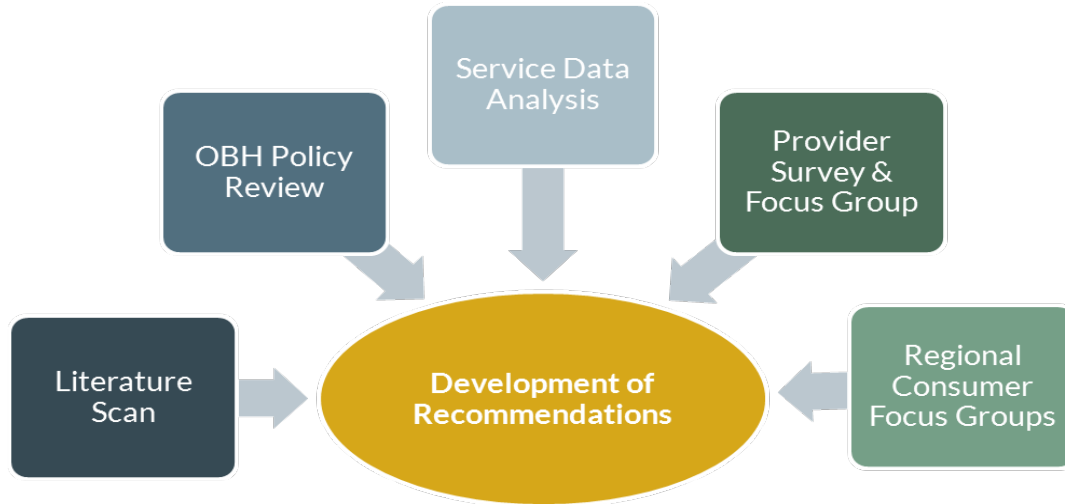
Emily Murillo, MSW

Senior Researcher

OMNI Institute

p. 303.839.9422 ext. 155

Five core project components served as primary information sources for the development of the Behavioral Health Equity Report: 1) a literature scan of best practices and field research; 2) a review of OBH policies in relation to national standards and cultural responsiveness assessments; 3) an analysis of client-level mental health and substance abuse service data from the state CCAR and DACODS systems; 4) a focus group and brief survey of behavioral health service providers; and 5) four regional focus groups with participants receiving behavioral health services.



KEY THEMES

Following a preliminary exploration of data regarding behavioral health equity, the report focuses on highlighting project findings that inform potential responses to equity issues. Project findings are centered on 6 themes that surfaced throughout the literature as well as through local data collection efforts:



RECOMMENDATION HIGHLIGHTS

A summary of potential action areas is outlined below. It should be noted that some may reflect work OBH has already initiated; see full report for a list of current OBH activities related to cultural responsiveness.

Office of Behavioral Health Service Data

- OBH should **conduct further inquiry to elucidate needs and guide strategies for addressing potential behavioral health inequities**. In particular, emerging findings suggest potential inequities of diverse groups in areas of behavioral health *access* (over and underrepresentation of specific populations, relative to the Colorado population); *service characteristics* (differences in number and length of treatment episodes) and *outcomes* (higher or lower rates of treatment improvement).
- Work with appropriate stakeholders to **develop additional measures of social determinants of behavioral health and other contextual factors** (e.g., socioeconomic factors, unique issues associated with geographic variability, etc.); **ensure that new data tracking systems and integration efforts include data points** that will facilitate understanding of trends and differences.
- Continue focused efforts to **improve the completeness and accuracy of service data**; and ensure that the new data integration efforts and systems include processes to support high data quality and ongoing monitoring of needs and emerging concerns.
- Set up processes (data reports) to **continually analyze behavioral health patterns** in relation to population shifts, policy changes, and other contextual factors to monitor trends and pinpoint contributors to change over time.

Organizational Leadership & Policy

- Continue to promote organizational assessment and transparency related to cultural responsiveness and share related OBH data findings and internal learnings.
- Continue to **offer provider technical assistance and consultation** (or recommended consultants) related to organizational self-assessment.
- **Support CLAS learning forums** as a vehicle for providers to explore CLAS standards and internal organizational assessment processes
- **Consider modifications to OBH rules for leadership and policy**, including adding a recommendation for providers to designate internal resources for organization-level cultural responsiveness work
- **Enhance knowledge and awareness related to OBH policy** at both the organizational (OBH) and provider levels; and **develop resources** that summarize policy, resultant implications and guidance for implementation

Workforce Development & Training

- Continue to **implement OBH internal workforce diversification efforts**, including ongoing sharing of OBH learnings and progress
- **Formalize a long-term approach to OBH training offerings** that considers both a range of content areas and organizational readiness factors; **ensure that key training opportunities are geographically accessible** and explore innovative approaches to increasing access for rural communities
- **Offer OBH leadership presence at training events** to generate buy in and communicate the value of cultural responsiveness training
- **Consider modifications to OBH rules for workforce development and training**, including the addition of policy regarding recommended recruitment and retention practices to ensure a culturally and linguistically

diverse workforce; and explicit training requirements for cultural responsiveness across all areas of the OBH rules

Community Engagement & Partnerships

- **Pursue more formalized community partnerships** to ensure community perspectives, input and recommendations are incorporated into the planning and implementation of services
- **Allocate resources for the promotion of cross-system collaboration** through networking, training and education events; include strategies for engaging partners who may not be connected with typical networks
- **Consider modifications to OBH rules for community engagement and partnership**, including the addition of more explicit language and standards regarding the nature and level of community engagement expected of providers

Education & Outreach

- **Develop issue briefs or community education materials** that providers can utilize for local information dissemination about critical behavioral health issues
- **Conduct or support local needs assessments** that assess local knowledge and community perceptions related to behavioral health
- **Promote provider awareness** regarding relevant funding opportunities

Service Delivery Modifications

- **Expand the use of evidence-based service delivery practices** through training, information and resources dissemination
- **Consider modifications to OBH rules for service delivery modifications**, including: revisions to rules in all areas in which culturally and linguistically responsive language and communication is not explicitly noted; and ensure language provisions for informed consent and other information for individuals receiving services

Organizational Data Collection & Monitoring

- Initiate long-term planning to enhance provider-level evaluation capacity and sustainability
- **Support providers in obtaining access to provider-level and community/regional-level data** on an ongoing basis; and assist with the interpretation of data and its potential implications for service provision
- Continue to promote the use of organizational self-assessment tools
- Identify recommended quality improvement measures and resources for providers (e.g., client satisfaction surveys etc.)