

DMH/OPHIC FY24 Candidate Deliverables

NO.	DELIVERABLE NAME	DELIVERABLE DESCRIPTION	UPDT. FREQ.	SOW LINE	COMMENTS	SOURCES
	Participating Practice Information	Description of practices enrolled in the program with general demographics and patient numbers.	QTR	2.1 2.2.10	Split into PCS unchanging data and a separate report of changeable data. What can we produce easily in an SSRS Report.	PCS. May separate out chart abstraction content for patient numbers.
	EHR-Based Description	Identify 2 target EHR/Practice combinations	QTR	2.2.2		Email or document.
	EHR-Based Guide	Protocols for applying lessons learned from working with specific EHR that can be used on future practices and future EHRs.	EOP	2.2.2	Done with OFMQ.	Narrative at end of project. Delivered within 3 months at the end of FY24.
	Facilitation Activity Report	Documentation to support work of PFs in practices.	QTR	2.2.3 2.2.5	Focus numbers, not text. SSRS with encounters.	SSRS built from REDCap data.
	AD Visit Activity Report	Documentation to support visits by an Academic Detailer to practices.	QTR	2.2.4	Available from REDCap showing AD visits with activity and participants.	AD REDCap report exported to XLS.
	Advisory Group Candidates	Names and contact information of OPHIC members offered to participate in the DMH's advisory panel.	1X	2.2.7	Who else is on this panel.	Contact information in email or document. May include OFMQ.
	Planning Meeting Agenda/Minutes	Documentation to show plans for scheduled planning meeting with DMH personnel	MO	2.2.6	Same as what we have done over time.	May want to review agenda format.
	Practice Performance Report	Documentation that identifies each participating practices progress toward screening levels and frequency along with numbers of BI and RT.	QTR	2.2.8 2.2.9 2.2.11	Will require creating a data entry process to capture this data on an on-going basis. May include OFMQ and chart review. If EHR-based, determine if these are possible. Number-based.	Screening levels from Access Control, EHR, or chart abstraction – TBD. BI or RT from chart abstraction. Will consider creating a REDCap project to capture.
	OK SBIRT Sustainability Plan	Documentation of OPHIC's recommendations for continuing the expansion of SBIRT practices in Oklahoma	EOP	2.2.12		End of Project narrative report. Delivered within 3 months at the end of FY24.
	Chess Health Test sites	Names of (minimum) 2 locations to test using Chess Health for SBIRT screening.	1X	2.2.14	Primary emphasis on replacing Access Control.	Email or document.

DMH/OPHIC FY24 Candidate Deliverables

NO.	DELIVERABLE NAME	DELIVERABLE DESCRIPTION	UPDT. FREQ.	SOW LINE	COMMENTS	SOURCES
	Chess Health Feedback	Document to DMH and CH with observations on the screening product.	EOP	2.2.14		Need to plan transition from Access Control to Chess Health.
	SBIRT-OK Implementation Guide	Documentation to guide implementation of SBIRT-OK.	1X	2.2.15	Will have multiple versions for Access Control, Chess Health, and EHR-based.	At end of project from Duffy's The Book. Delivered within 3 months at the end of FY24.
	Reimbursement Rates for SBIRT	Recommendations to OK practices on availability of reimbursement for SBIRT activities.	1X	2.2.16	This may include what is currently available along with a demonstration of paying practices to satisfy all elements of the SBIRT model. Senate Bill 444 will include new reimbursements. Will be released Nov. 1.	Create one-pager. May need OFMQ.
	Practice Patients' Feedback on SBIRT	Gather and document patient feedback from participating practices.	QTR	2.2.17	REDCap project and may include providers and patients. Will need to determine OPHIC's role. New IRB needed. May also request clinician feedback.	Create patient survey with report on findings. Delivered within 3 months at the end of FY24.
	Zero Suicide Protocols	Documentation that may be used to guide the creation of policies and best practices in a primary care practice participating in this project.	1X	2.3.1	Formalize Cheryl's process. Create policy document, similar to Harm Reduction, that the practice will sign.	Chuck will guide creation of formal policy document for review by DMH. Delivered within 3 months at the end of FY24.
	Zero Suicide Practice Assessment	Formal assessment document showing a participating practice's implementation of ZS protocols and evidence they are being followed.	QTR	2.3.2	Scorecard for practice on their ZS Readiness to handle potential suicide.	Will become a REDCap project.
	Reporting Tool	Site created by OPHIC to capture elements of deliverables to support the SBIRT program and completion of deliverables.	QTR	3.3	Created by OPHIC to capture data for reporting.	Create systematic process to push all data to DMH. Ideal to create XLS document from SSRS and REDCap. Want to show fidelity of results across full SBIRT spectrum.
	Financial Expectations	Documentation from OPHIC showing payment expectations for the SBIRT project.	1X	4.1	Tim, Jody, and Juell will determine the compensation amounts.	Developed by OPHIC.

DMH/OPHIC FY24 Candidate Deliverables