

# CONNECTION LEARNING HEALTH SYSTEMS HUB-WIDE DATA SNAPSHOT BUILDING A TWO-STATE LEARNING HEALTHCARE SYSTEM



Mental health delivery systems have newly turned to the learning health system (LHS) to knit people from multiple organizations together toward a common purpose: coordinating care with a focus on optimizing performance for clients, families, clinicians, and staff. Connection Learning Healthcare System (CLHS) is an EPINET hub creating a network among four academic institutions, five healthcare systems, two state behavioral health systems, and 23 CSC programs in Pennsylvania and Maryland. We approached creating CLHS with a plan to employ structures, activities, and culture to achieve LHS goals.

## Learning Health System Domains



## Sample CLHS Activities by LHS Domain



### Create a Learning Culture

#### Bi-annual data feedback and discussion

Presenters describe findings from CLHS or national EPINET data and lead discussions about implications for clinical practice.

*A CLHS researcher presented CAB data to illustrate best practices for reducing suicidality in FEP; a clinician described his use of Tableau to visualize CAB data for measurement-based care.*



### Use Data Feedback to Identify Areas of Improvement

#### Collection of CLHS CAB

Supports standardized CSC program data collection.

*CLHS CAB is harmonized with measures selected for EPINET; has additional domains of interest to stakeholders in each state.*



### Align Payment and Policy Initiatives

#### State partner collaborative meetings

Meet with state funders to discuss progress, review outcomes, and make changes as needed.

*State partners meet with state FEP CSC leadership and with counterparts in the other state through breakout sessions in Community of Practice meetings.*



### Rapidly Translate Knowledge into Practice

#### Training and implementing new practices through research participation

Supports research projects that collect data on FEP clinical care topics.

*Brief intervention for cannabis use, understanding barriers to engagement for Black clients and families, exploring young adults' preferences and needs for school and work support.*



### Engage Patients and Other Important Stakeholders

#### Stakeholder-specific workgroups

Groups dedicated to imbuing a specific stakeholder group's perspective into CLHS activities.

*Lived Experience, Family Member, and Staff/Clinician Collectives.*

## Lessons Learned

1

### Stakeholders face different barriers and facilitators to LHS involvement.

**Our Staff and Clinician Collective** address this by identifying ways to reduce obstacles, showcasing how LHS involvement has benefitted their programs, and crafting procedures for partnering with low-involved programs.

2

### All stakeholder groups should be represented at the earliest stages of LHS planning.

We established the **CLHS Lived Experience** and **Family Member Collectives**.

3

### Using data to continuously improve clinical care requires creativity, dynamic navigation, and ongoing conversations.