



# Benchmarking Insights

## Process Benchmarking with the National Council

A nationwide process benchmarking exercise was conducted by the National Council for Community Behavioral Healthcare in partnership with Behavioral Pathway Systems on the engagement/retention of adult outpatients. Almost 170 organizations responded to the on-line survey. The practices of organizations with high rates of retention were found to differ markedly from those of others. It was found that top performing organizations were much more likely to observe the following methods:

- Having clinicians call clients that no-show or cancel two times in a row
- Limiting the initial intake process to an hour or less, on average
- Making it a standard practice to personally introduce a client to a member of his or her treatment team during or immediately after the intake
- Having clinicians routinely call clients before the initial face-to-face appointment to introduce themselves and establish rapport
- Having staff routinely assess and discuss potential barriers to care with the client as part of the intake process
- Establishing an ACTIVE ongoing discharge planning process that is defined by policy and/or training
- Avoiding the use of voicemail at least 95% of the time when persons make their initial call to request outpatient services
- Implementing a standard, scripted approach that is used by clinicians when a client requests to reduce or terminate treatment

A summary of this project is reported in the October 27, 2008 issue of *Mental Health Weekly* (page 6). The National Council will also be disseminating the results of this project in webinars and over vehicles. A follow-up phase of this project is also planned to investigate the organizational impact of adopting these potential best practices.

## Data Driven Decision-Making

The New York Times has published a wonderful article about the importance of data-driven decision-making in health care. Citing the success of data-driven decision-making in sports, the authors challenge health care leaders to adopt a similar perspective. It is a very persuasive and entertaining article that helps “make the case” for a data-driven culture. To access the article, use the following link:

<http://www.nytimes.com/2008/10/24/opinion/24beane.html?ei=5070&emc=eta1>



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## **Benchmarking vs. Research**

Benchmarking and formal empirical research are related, but very different activities. The question is often raised as to how they differ. Benchmarking is an active, ongoing process, while research generally has a defined end point, usually demarcated by the dissemination of a report. The sample sizes associated with research and benchmarking may also differ. Formalized research requires a large enough sample to allow for generalization. It is not uncommon for research sample sizes to number in the thousands or more. In contrast, benchmarking often draws upon very modest sample sizes, often less than 10. Moreover, classical benchmarking models simply involve a sample size of two—one organization comparing its practices with another regarded as a leader in the field. The rigor, and often the expense, associated with formal empirical research extend well beyond benchmarking because of what is possible and practical under “laboratory conditions”. Benchmarking is “real world research” carried out in applied settings where the controls are much more limited. Most importantly, however, formalized research attempts to provide answers, while benchmarking seeks to provide ideas and hypotheses to consider. The helpful information provided by benchmarking results from reasonable and manageable effort. Therefore, while these two disciplines share a number of commonalities, they also differ in many respects.

## **Contact Us!**

We want to create an active and vibrant community of individuals and organizations interested in benchmarking, performance management, and outcomes. If you have thoughts, ideas, suggestions, tips, or questions, we'd like to hear from you. Please feel free to contact us at [info@bpsys.org](mailto:info@bpsys.org).