



Monterey County Behavioral Health Policy and Procedure

Policy Number	104
Policy Title	Compliance Plan
References	
Form	Monterey County Behavioral Health Compliance Plan
Effective	February 26, 2015 Updated: December 3 rd 2020

Policy

The Monterey County Behavioral Health (MCBH) compliance plan is articulated in its entirety in the “Monterey County Behavioral Health Compliance Plan” (“Compliance Plan”), which can be found at www.mtyhd.org/QI or requested from MCBH QI by contacting 831-755-4545.

It is the policy of MCBH that all of its staff and contract providers abide by the content of the Compliance Plan. Failure to comply with its provisions will result in progressive discipline per Monterey County policies or contractually established sanctions.

It is also MCBH policy that:

1. The Compliance Officer for Monterey County Behavioral Health is the Health Department Privacy Officer.

2. A Compliance Committee shall convene quarterly. This committee will include:

- a. The Behavioral Health Director;
- b. Behavioral Health Deputy Director(s);
- c. The Medical Director;
- d. Finance Manager;
- e. Relevant program managers, analysts, and other staff as needed.

3. The Compliance Committee will review the compliance program annually to evaluate trends, needed trainings, and updates to the Compliance Plan.

4. The Health Department Compliance Office operates a compliance phone line: (831) 755-4018, or report anonymously by calling 1-866-262-8618

Procedures

Compliance Plan Employee Attestation

1. All MCBH staff, interns, trainees, volunteers (collectively referred to as “Employees”) and contractors will review the Compliance Plan, which includes the Code of Conduct and links to compliance related MCBH, Monterey County Health Department, and Monterey County policies. Employees and contractors are expected to familiarize themselves with the content of the Plan and all compliance related policies.

- 36 2. After reviewing and familiarizing themselves with the Plan and all associated policies,
37 employees and contractors will complete and sign the Compliance Plan Review Attestation
38 in the electronic health records system.

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40 Compliance Hotline

- 41 1. The Compliance Hotline will be answered by a live Privacy Officer during regular
42 business hours.
- 43 2. If due to unforeseen circumstances, such as high call volumes, the caller is diverted to the
44 Hotline's confidential voicemail, Compliance Hotline staff will provide a follow-up phone call
45 to the caller within 24 business hours.
- 46 3. Calls are confidential and Compliance Hotline staff is to discuss the calls only with MCBH
47 QI clinical staff members tasked with compliance investigations and assessments.
- 48 6. The caller can opt to remain anonymous if preferred. However, The Privacy Officer
49 may will log the following regarding the call:
- 50 a. Name and contact information of caller, if provided;
51 b. Date and time of the call; and
52 c. The description of the compliance issue reported during the call
- 53 7. The log is confidential and to be viewed only by Privacy Officer and MCBH QI clinical staff
specifically tasked with compliance investigations and assessments.
- 54 8. The Privacy Officer and MCBH QI clinical staff assigned will conduct an investigation and
assessment, which may include, but is not limited to, document reviews, site visits, and/or interviews.
- 55 9. If during the course of the investigation and assessment, it is determined that the issue
56 reported is better suited for follow-up by another entity (e.g., human resources, privacy
57 officer), the assigned staff member will forward the issue to the appropriate
58 entity.
- 59 10. During the course of this process, the name of the reporting party will remain confidential
60 and shall not be provided to any parties to the investigation and assessment.
- 61 11. The length of the follow-up investigation, assessment, and resolution will vary but will be
62 resolved as soon as reasonably possible.
- 63 12. Depending on the nature and content of the compliance report, the staff
64 tasked with the investigation and assessments may inform the Privacy Officer of the
65 report at any time during the process but must inform the Privacy Officer of the results
66 of the investigation and assessment.
- 67 13. The Privacy Officer or their designee will engage all necessary parties to resolve
68 issues found during the investigation and assessment process. This may include, but is
69 not limited to, working with law enforcement agencies, referring the situation to Monterey
70 County Health Department Human Resources for further action, referring the situation to
71 MCBH Administration to initiate contractually established sanctions.

