

<b>Quality Improvement Committee (QIC) Meeting for SMH and SUD Treatment Services</b>	<b>Date:</b> 3/16/2023
	<b>Time:</b> 10:00am-12:00 PM
	<b>Location:</b> Zoom

**Meeting called by:** Quality Improvement Team

**Facilitator:** Janet Barajas

**Attendees:** Janet Barajas (QI), LeeAnn Jones (QI), Thi Velasquez (QI), Amanda Engeldrum Magana (PVPSA), Ariana Zamudio (MCBH), CeCe Mendoza (Seneca), Chloe Brown (MCBH), Connie Santistevan (Door to Hope), Dana Edgull (MCBH), Esmeralda Contreras (MCBH), Gillian Renteria (Valley Health Associates), Jackie Townsend (MCBH), Jan Wolf (QI), Jessica Benway (re-Mind), Jessica Jones (MCBH), Jessica Mora Ramirez (MCBH), Jessica Sanchez (QI), Jill Walker (MCBH), Jolene Coe (MCBH), Jon Drake (MCBH), Kathy Keilman (MCBH), Kim Gray (QI), Kim Vanderham (Seneca), Lynda Kaufmann (Pysnergy), Maria Henry Casteneda (MCBH), Melanie Rhodes (MCBH), Melissa Jimenez Staretorp (MCBH), Nancy Krogseng Adams (MCBH), Nick Cronkhite (MCBH), Phoebe Young (QI), Rachel Amerault (MCBH), Raquel Morris (MCBH), Relindis Diaz (MCBH), Rosa Marchebout (QI), Ryan Romero-Speed (re-Mind), Sal Cervantes (MCBH), Shannon Castro (MCBH), Sharon Riley (Door to Hope), Shiba Sumeshwar (MCBH), Stephanie Luke (Koinonia), Whitney Burgess (MCBH)

**Minutes**

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<b>Agenda item:</b>	Announcements	<b>Presenter:</b>	
<b>Discussion:</b>	<ul style="list-style-type: none"> <li>Melanie Rhodes – New Adult Post-Hospital Team developed &amp; Update to Crisis Contact to Access Crisis Line.</li> <li>Lynda Kaufman (Synergy Programs) – Awarded grant for supportive housing for older adults and looking for Board Members.</li> </ul>		
<b>Conclusion:</b>	No questions/comments from the audience		

<b>Agenda item:</b>	Policy 141 – Health Service Records Retention	<b>Presenter:</b>	Thi Velasquez
<b>Discussion:</b>	Update: “Records shall be retained for a period of 10-years from the final date of the contract period between the plan and the provider between the plan and the provider, from the date of completion of any audit, or from the date the service was rendered, whichever is later”.		
<b>Conclusion:</b>	No questions/comments from the audience		

<b>Agenda item:</b>	Policy 143 – Psychologists Waivers and Licensure Requirements	<b>Presenter:</b>	LeeAnn Jones
<b>Discussion:</b>	Update: Any supervision may be provided in real time, which is defined as through in-person or synchronous audiovisual means, in compliance with federal and state laws related to patient health confidentiality.		

<b>Conclusion:</b>	No questions/comments from the audience		
<b>Agenda item:</b>	CalAIM Updates	<b>Presenter:</b>	Janet Barajas
<b>Discussion:</b>	<ul style="list-style-type: none"> <li>• Republished SMHS &amp; DMC-ODS Documentation Manuals. Emailed and published on QI Website. <ul style="list-style-type: none"> <li>○ SMHS Updates: Added Screening &amp; Transition Tools Chapter, Transition Chapter, Reasons for Recoupment, Minor edits to case management services requirement re TCM progress notes.</li> <li>○ DMC-ODS: Added clarification re: Problem List &amp; Treatment Plan requirement. MCBH still requires Treatment Plan.</li> </ul> </li> <li>• Reviewed BHIN 22-065 Adult &amp; Youth Screening and Transition of Care Tools.</li> <li>• Reviewed Utilization Management (UM), Audit, Oversight &amp; Recoupment Standards for Specialty Mental Health Services (SMHS) Policy.</li> </ul>		
<b>Conclusion:</b>	<ul style="list-style-type: none"> <li>• Screening &amp; Transition Tools Questions: <ul style="list-style-type: none"> <li>○ Question re: concurrently receiving SMHS &amp; NSMHS and need for Case Coordinator. Answer: Yes, a care Case Coordinator would be required as MCBH uses care coordination model.</li> <li>○ Question re: timeliness is mentioned a lot in the policy, but that is not clear. Answer: Referenced Policy 148 Network Adequacy and Timeliness Standards. <ul style="list-style-type: none"> <li>▪ Follow up question re: MCP timeliness. Answer: MCP has timeliness standards as well. Compliance Hotlines can be used for beneficiaries to complain re: timeliness issues.</li> </ul> </li> <li>○ Suggestions: Add a footnote re: timeliness being outlined in Policy 148. QI will look into the possibility of this, as policy was adopted from CalMHSA.</li> </ul> </li> </ul>		
<b>Agenda item:</b>	Beneficiary Handbooks	<b>Presenter:</b>	Janet Bajaras
<b>Discussion:</b>	Emailed Beneficiary Handbooks (SMHS & DMC-ODS) and requirement to post notice of these updates in clinics. Handbooks also posted on QI website.		
<b>Conclusion:</b>	No questions/comments from the audience		
<b>Agenda item:</b>	Training Updates	<b>Presenter:</b>	Jill Walker, LeeAnn Jones & Thi Velasquez
<b>Discussion:</b>	<ul style="list-style-type: none"> <li>• Required Annual Trainings Policy: <ul style="list-style-type: none"> <li>○ Training Department developing a policy clarifying training requirements. Collaborative process with MCBH Staff &amp; Contracted Providers and will bring drafted policy to QIC for additional feedback.</li> </ul> </li> <li>• SMHS &amp; DMC-ODS Clinical Documentation Trainings dates and</li> </ul>		

	registration process shared. <ul style="list-style-type: none"> <li>• Problem Resolution Process Training date and registration process shared.</li> </ul>		
<b>Conclusion:</b>	<ul style="list-style-type: none"> <li>• Required Annual Trainings Policy:             <ul style="list-style-type: none"> <li>○ Suggestion: add new requirement of 3-hours of telehealth training for BBS registrants and BBS licensed staff.</li> <li>○ Question re: availability of supervisory training. Answer: Training Division is working on paying for trainings that can be made available to MCBH Staff, and may also be available to Contract Provider Staff.</li> <li>○ Question re: time spent in training and the intersection with payment reform and sustainability. Answer: the sustainability process will move and adjust regarding payment reform, details to come.</li> </ul> </li> <li>• SMHS Clinical Documentation Training:             <ul style="list-style-type: none"> <li>○ Question re: availability of these trainings for interns. Answer: Learning Plan in LMS will support with scheduling attendance to these trainings.</li> </ul> </li> <li>• Problem Resolution Training:             <ul style="list-style-type: none"> <li>○ How do we ensure beneficiaries are fully informed of this process? Proposed short videos in English &amp; Spanish posted on public facing website. Idea: PRA to develop client-centered videos.</li> </ul> </li> </ul>		
<b>Agenda item:</b>	Cultural Relevance & Humility Updates	<b>Presenter:</b>	Dana Edgull
<b>Discussion:</b>	<ul style="list-style-type: none"> <li>• Cultural Relevance &amp; Humility Committee on pause until DHCS renewed requirements are rolled out. Will pull together a new Oversight Committee to fulfill these requirements. First meeting in April and asking for interested participants.</li> <li>• Suicide Prevention Efforts: Resource shared – <a href="http://strivingforsafety.org">strivingforsafety.org</a></li> </ul>		
<b>Conclusion:</b>	No questions/comments from the audience		
<b>Other Items</b>			
<b>Discussion:</b>	Question re: concurrent TARs. Currently not getting updates re: hospital admissions. Answer: QI Staff are still creating “Pre-Admission” TAR episodes in charts. QI manager will look into this to ensure updates are still being provided to Clinical Teams		
<b>Next QIC meeting</b>	June 15, 3023; 10:00AM – 12:00PM		