

Quality Improvement Committee (QIC) Meeting for SMH and SUD Treatment Services	Date: 12/21/2023
	10:00am-12:00 PM
	Zoom

Meeting called by: Quality Improvement Team

Facilitator: Janet Barajas, MCBH QI Manager

Attendees:
 Janet Barajas (QI Manager); Isaias Betancourt (QI IT); Katie Martinez (QI SPSW); Kalyssa King (United Way MCCA); Melanie Rhodes (MCBH Deputy); Amanda Engeldrum Magana (PVPSA); Araceli Flores (MCBH); Bruce Adams (Re-MIND); Caitlyn Still (Mobile Crisis Benefit); CeCe Mendoza (Seneca); Celia Trujillo (Training SPSW); Elizabeth Garcia (MCBH); Gilberto Cruz-Pulido (VHA); Gillian Renteria (VHA); Iohana Tapia (MCBH Manager); Jackie Townsend (MCBH Manager); Jan Wolf (QI MAIII); Jen Uribe (QI MAII); Jeremy Allred (MCBH); Jessica Jarrett (QI SPSW); Jolene Coe (MCBH); Jon Drake (MCBH Assistant Bureau Chief); Julia Ryan (988 Volunteer); Kathy Keilman (MCBH); Kelley Molton (MCBH Manager); Kim Gray (QI SPSW); Lara Clayton (MCBH Manager); LeeAnn Jones (QI Supervisor); Maria Henry Castaneda (SUD SPSW); Mark Alexakos (MCBH Medical Director); Nicole Vanneman (Mobile Crisis Benefit); Philip Sherwood (MCBH); Phoebe Young (QI SPSW); Rachel Amerault (SUD Manager); Sharon Riley (DTH); Shiba Sumeshwar (MCBH Privacy Officer); Stephanie Zamudio (PVPSA); Susan Guffee (Seneca); Tammy Rose (QI SWIII); Trinh Tran (Seneca); Yvette Carreon (MCBH)

Minutes

Agenda item:	Welcome/Introductions	Presenter:	Janet Barajas
Discussion:	<ul style="list-style-type: none"> Jen Uribe (MCBH QI MAII) Nicole Vannerman and Caitlin Still (Mobile Crisis Benefit) Susan Guffee (Seneca Crisis Services Director) Julia Ryan (Volunteer with 988 Line in Santa Cruz) 		
Conclusion:	No questions		

Agenda item:	Announcements/Acknowledgements	Presenter:	Janet Barajas
Discussion:	<ul style="list-style-type: none"> EQRO on 2/13/24 and 2/14/24. 		
Conclusion:	QI will be reaching out to SMH and DMC-ODS service providers to invite them to participate in the sessions.		

Agenda item:	Mobile Crisis Benefit and Policy Feedback Discussion	Presenter:	Melanie Rhodes
Discussion:	<ul style="list-style-type: none"> Updated to establish policy for Mobile Crisis Team (MCT), and in accordance with state mandates. Integrates mobile crisis system county-wide, and across MH and SUD delivery systems. Community Crisis Line will be started to provide a rapid and in-person response. Tools have been developed to determine when to dispatch the MCT and for safety planning. Process on non-urgent referrals is clarified. Staff roles are clarified pertaining to 2-person teams, peer support specialists and community health workers. 		
Conclusion:	Deputy to obtain provider feedback and work to finalize policy by 1/2024.		

Agenda item:	CalAIM Updates	Presenter:	Janet Barajas
Discussion:	a. BHIN 23-068 <ul style="list-style-type: none"> • Program leadership is encouraged to review the new requirements as updates affect both SMH and DMC-ODS services. • Assessments: <ul style="list-style-type: none"> ○ Removal of initial (30- and 60- day) and reassessment timelines for DMC-ODS providers. Assessments will need to be completed as expeditiously as possible based on beneficiary’s clinical needs and in accordance with generally accepted standards of practice. ○ Clarification that Crisis assessments do not meet comprehensive assessment requirements. ○ SUD and possibly integrated assessments will need to be updated by 1/1/2025 to include the updated ASAM criteria. ○ QI will help identify what areas of the SMHS assessments non-licensed providers can contribute to. • Progress Notes: <ul style="list-style-type: none"> ○ Progress notes need to include the duration of direct service, location/place of service, intervention and plan. ○ Group progress notes will require the beneficiary’s response. ○ Crisis services should be documented in 1 calendar day (previously business day). ○ QI is seeking further clarification from the state on the list of programs/services no longer requiring a weekly summary has been expanded. • Care Planning: <ul style="list-style-type: none"> ○ Will use right click template for ICC in addition to TCM notes. ○ DMC-ODS Residential and WM programs will be reverting back to BHIN 21-001 for treatment plan requirements. ○ IHBS and TFC services will no longer require a treatment plan. 		
Conclusion:	QI will be sending out updated Documentation Guides and Policies effective 1/1/2024. QI will be working with providers on updating the assessments by 1/1/2025.		
Agenda item:	Drug Medi-Cal Updates	Presenter:	Rachel Amerault
Discussion:	<ul style="list-style-type: none"> • Multiple trainings will be offered in 2024 and will be taped and offered on NeoGov. <ul style="list-style-type: none"> ○ Clinical Documentation ○ Annual DMC-ODS ○ DHCS requirements for LPHAs and WM providers • EQRO <ul style="list-style-type: none"> ○ Clinical PIP – SUD SPSW ○ Non-Clinical PIP – QI Supervisor 		
Conclusion:	No questions		
Agenda item:	Training Updates	Presenter:	Celia Trujillo
Discussion:	<ul style="list-style-type: none"> • Working on an application to provide CEs to psychologists and SUD providers by 2/1/2024 or near future. • Updating LPS Policies– PRA, Training Manager and QI SPSW. • Policy to be developed to clarify staff required to take CSSRS training. 		

	<ul style="list-style-type: none"> • Developing a Stanley Brown Safety Plan training. • Formalizing application process for master's level interns interested in a 2-year program. • Recruitment for master's level interns. 		
Conclusion:	Contact Training email for any training needs.		
Agenda item:	MISTI Updates	Presenter:	Jan Wolf
Discussion:	<ul style="list-style-type: none"> • Consultants onsite on 12/12/23 and 12/13/23. • Gathered with managers and change agent team. • Developed a list of action items identified in welcoming, hopeful, and integrated care. • Working on identifying key priorities, developing a framework policy, and developing sub-committees (i.e., access to care and welcoming). • Half day training with the consultants. • Given tools to make system changes. • Reach out to MISTI email address if you are interested in becoming a change agent. 		
Conclusion:	Consults will return 3/26/23 and 3/27/23. Contact MISTI email if interested in becoming a change agent.		
Agenda item:	Quality Improvement Plan	Presenter:	Janet Barajas
Discussion:	<ul style="list-style-type: none"> • Required to have a plan that addresses activities around access to services. • With regards to monitoring /improving access to services and developing a portal for beneficiaries to access their records electronically, QI is working with NetSmart to map out and implement myHealthPointe 2.0 for beneficiaries to access their records. • Timeliness for MH and SUD services is required within 10 business days of request. QI will be meeting with Access Teams to develop a new policy and procedure to address these new data points. • Timeliness for urgent MH appointments is required within 48 hours of request. • Medication Monitoring: Foster care youth. Develop a plan and methods for how we monitor medication for our youth and foster care. • Working on a pilot for collaborative documentation to increase beneficiary engagement in the care planning process and reduce documentation time burdens. • Implementing a mobile crisis program. • Working on improving our follow up with beneficiaries with a primary MH or SUD diagnosis after an ED visit. • Data exchange between providers to improve client care. • DEIB advisory committee. • Developing a plan to evaluate beneficiary welcoming experience through MISTI. 		
Conclusion:	No questions		
Agenda item:	New/Updated Policies	Presenter:	Kim Gray, Phoebe Young, LeeAnn Jones,

Discussion:	<p>a. 148 Network Adequacy and Timeliness Standards</p> <ul style="list-style-type: none"> • Minimal updates. • Non-urgent appointments for MDs must be offered in 15 vs. 10 business days. • Time and distance standards changed. • Initial psychiatry request form was included to help track services. <p>b. 300 Reporting of Child Abuse and Neglect</p> <ul style="list-style-type: none"> • Updates have been made to clarify language, but actual reporting requirements have not changed. • General and severe neglect are defined. <p>c. 300B Reporting of Elder And Dependent Adult Abuse</p> <ul style="list-style-type: none"> • Updates have been made to clarify language, but actual reporting requirements have not changed. <p>d. 338 Risk Assessment, Safety Planning, and Subsequent Services</p> <ul style="list-style-type: none"> • Effective 1/1/2024. • Trainings are highly recommended: Columbia Brief Introduction, Columbia Foundations, Columbia Documentation, Columbia Coaching (working with a contractor). • Columbia is required at intake and reassessment for beneficiaries 6 and older. • SWIII, MHRS, and licensed/licensed eligible staff may complete the Columbia. • Columbia has a Full or Recent form version. • Stanley Brown Safety Plan can be administered using the Safety Plan form in Avatar. • Copy of Safety Plan for beneficiary issued using the 169 report in Avatar. • Follow-up procedure has been standardized based on low, moderate, or high risk. • Compliance will be monitored during utilization reviews. <p>e. 701 Narcan Emergency Administration</p> <ul style="list-style-type: none"> • New policy on guidelines for emergency Narcan administration. • Medical Assistance will be responsible for obtaining, tracking, and distributing Narcan. • Training on NeoGov is required for all MCBH staff by 1/31/2024 or within 60 days of employment. <p>f. 702 Narcan Non-Emergency Distribution</p> <ul style="list-style-type: none"> • New policy on guidelines for non-emergency Narcan distribution. <p>g. 706 Substance User Disorder Services for Perinatal Practices</p> <ul style="list-style-type: none"> • New policy based on the DHCS Perinatal Practice Guidelines. • Reviews target population, admission priority, outreach and engagement, partnerships, screening, intervention, assessment and placement, treatment planning (NTP only), problem list, referrals, interim services, and quality management.
Conclusion:	Motion to approve was passed and seconded for Policies 148, 300, 300B, 338 702 and 706. Approval of Policy 338 is contingent on clarifying the procedure for high risk follow up.

Agenda item:	Adjourned	Presenter:	Janet Barajas
Discussion:	Next meeting date.		
Conclusion:	N/A		
✓Items tabled	a. Help@Hands b. 707 Youth Services Policy	a. Present at next meeting. b. Send out to providers for review and approval.	
<i>Other Items</i>			
Next QIC Meeting	Date: 3/21/2024 Time: 10am-12pm Location: Zoom		