QUALITY IMPROVEMENT NEWSLETTER

MONTEREY COUNTY BEHAVIORAL HEALTH

Avanzando Juntos Forward Together

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MONTEREY INTEGRATED SYSTEMS TRANSFORMATION INITIATIVE (MISTI)

MISTI UPDATES

The MCBH Leadership Team and Steering Committee continue to discuss welcoming and access for our most complex clients. From that, both are beginning to explore the identification of co-occurring clients, looking at the differences between what we think or know about our clients and the data we have in our systems. The goal is that as we make progress, we will start to close the gap.

STEERING COMITTEE MEETING DETAILS

Date: Friday, October 25

Time: 10:30AM—12:00PM

Location: ZOOM

Change Agent

The Change Agents are nearing one full year of monthly meetings that have been jampacked with creative problem exploration, culminating in a draft Action Plan to support accomplishing our collective efforts in transforming our behavioral health system in the 24-25 fiscal year. The focus of this plan will be on developing integrated strength-based assessments, inter-program partnership, and increasing workforce competency. Once the details are finalized Change Agent representatives will report out this plan to MCBH Leadership in November.

CHANGE AGENT MEETING DETAILS

Date: Tuesday, October 29– 1 year celebration! 🥳

Time: 9:00AM—10:30AM

Location: Sun Street Center—King City
            641/ 637 Broadway St, King City

Myth: Detox is the same as rehabilitation treatment.

Fact: Detox is an important early component of recovery, and is incorporated into many treatment programs, but it is not a substitute for comprehensive treatment. The detox process helps to end the body's dependence on a substance to facilitate restoration of neurochemical balance. Detox also helps to managing withdrawal symptoms and keep people as safe and comfortable as possible, in order to allow full focus on longer-term recovery efforts. However, the larger issue of addiction entails compulsive behaviors, emotional triggers, environmental concerns, and even genetics, so further treatment is highly recommended for individuals struggling with substance use.

To view more information on MISTI, visit the QI Website

SPECIAL TOPICS | MISTI | Monterey County

POLICIES AND PROCEDURES-QI MEMO

UPDATES

Policy 151: Presumptive Transfer

- **EFFECTIVE** : September 6, 2024

- **SCOPE :**
This policy applies to all foster child or youth requiring SMHS in Monterey County

- **PURPOSE :**
To provide children and youth in foster care who are placed outside their counties of original jurisdiction access to Specialty Mental Health Services (SMHS) in a timely manner in compliance with Presumptive Transfer (AB 1299). Presumptive Transfer does not apply to children or youth with Kinship Guardianship Assistance Payment (Kin-GAP) or Adoption Assistance Program (AAP).

Click on the link below to view :
- Policy 151: Presumptive Transfer

Policy 732: DMC ODS Medication Assisted Treatment

- **Revised** : July 3rd, 2024

- **Policy:**
Policy Medications for Addiction Treatment (also known as medication-assisted treatment or MAT) Medications for addiction treatment include all FDA-approved medications and biological products to treat AUD, OUD, and any substance use disorders.

MAT is offered as a service component in all DMC ODS levels of care or delivered as a standalone service. MAT may be provided in clinical and non-clinical settings. Monterey County Behavioral Health (MCBH) shall ensure MAT services are available to eligible beneficiaries in accordance with 42 CFR 438 in all Drug Medi Cal Organized Delivery System (DMC ODS) programs and shall monitor the DMC ODS referral process or provision of MAT services. MAT must be provided in the following DMC ODS programs:

(a) Outpatient Treatment Services

(b) Intensive Outpatient Treatment Services

(c) Partial Hospitalization Services

(d) Residential Treatment Services

(e) Inpatient Services

(f) Withdrawal Management Services

Click on the link below to view :
- Policy 732: DMC ODS Medication Assisted Treatment

POLICIES & PROCEDURES

POLICY CLARIFICATION MEMOS - SCROLL TO BOTTOM OF PAGE

POLICIES AND PROCEDURES-QI MEMO

Policy 496: Communication With Persons in Care

- EFFECTIVE : October 1, 2024.

- Policy:

While providing services, it is appropriate for Monterey County Behavioral Health (MCBH) staff and its contracted providers to interact with persons in care using various forms of electronic communication. It is the intention of MCBH to ensure that its staff and contracted providers maintain professional boundaries for all types of electronic communication. MCBH's use of electronic communication methods is to be used as a business communication tool only. The systems and all messages they transport, or store are the property of MCBH. The purpose of this policy is to clarify the use of electronic communications with persons in care and to establish guidelines for its appropriate and secure use.

Click on the link below to view :
- Policy 496: Communication With Persons in Care
- MCBH Electronic Communication Consent form

Monterey County Behavioral Health will be soon deploying myHealthPointe which is a web/mobile application for beneficiaries to have access to their health care information. As a result, the restricted disclosure function in the current progress notes needs to be replaced with a compatible feature. The purpose of this memo is to outline the new procedure on how to use "restricted disclosure" in progress notes moving forward and applies to Monterey County Behavioral Health and contracted providers for mental health and substance use services.

This new procedure will take effect 10/1/2024.

To note, staff may use restricted disclosure for the following reasons only:
- Progress notes documenting fulfillment of a mandated reporting obligation (e.g., suspected child abuse or elder abuse reporting) as disclosure of this information may reasonably endanger the reporting provider.
- Progress notes containing information that might reasonably endanger the life or physical safety of the person in care or another person.
For minors, progress notes containing information that would have a detrimental effect on the provider's professional relationship with the minor.

Click on the link below to view the full memo:
- Restricted Disclosure in Progress Notes

QI TIPS/ TRICKS

Case Management Clarification

Reminder – **the person in care does not have to be present when billing case management.** Provided that the service meets the definition below, case management can be billed whether the person in care is present or not.

Case Management (301CA/302CA) (same as Targeted Case Management)

Case Management are services that assist a person to access needed medical, educational, social, pre-vocational, vocational, rehabilitative, or other community services that are impacted by person's mental health. The service activities may include, but are not limited to, communication, coordination, and referral; monitoring service delivery to ensure persons in care access to service and the service delivery system; monitoring of the person's progress once they receive access to services; and development of the plan for accessing services. Interventions must clearly document the connection between the case management need and mental health needs.

Multiple Case Management Services in One Day

When multiple case management services are provided to the same client on the same day by the same staff, it is acceptable to write a **single progress note for all case management provided**. This form of documentation is encouraged for the following examples:

Client A:
- Intervention 1 occurred in the AM where the SWIII/MHRS provided Case Management related to linking client to Bridge House (30 min service duration, 0 min travel, 7 min documentation)
- Intervention 2 occurred in the PM where the SWIII/MHRS provided Case Management related to linking client to food resources (25 min service duration, 0 min travel, 5 min documentation)

Case management progress note would reflect: 55 min service duration, 0 min travel, 12 min documentation

Client B
- Intervention 1 occurred in the AM where the SWIII/MHRS provided Case Management related to linking client to psychiatry appointment (40 min service duration, 0 min travel, 8 min documentation)
- Intervention 2 occurred later in the AM where the SWIII/MHRS provided Case Management related to linking client to homeless shelter (35 min service duration, 20 min travel, 8 min documentation)

Case management progress note would reflect: 75 min service duration, 20 min travel, 16 min documentation

MCBH TRAINING

MCBH Training would like to remind you of our upcoming ***Law & Ethics trainings***!

Law & Ethics

ENROLLMENT

- All courses are listed in NeoGov Learn w/the Prefix "***MCBH – Law & Ethics:***"
- All courses offer Continuing Education credits (BBS only at this time)
- Course Confirmation and Reminders are now provided through NGL

All courses will be virtual on the Demio System LMS (Provided by our trainers).

COURSES

Telehealth

This course will meet the BBS 3 Hour Telehealth requirement for licensure/associate application & renewal
October 31, 2024 8:45 AM – 12:00 PM

Annual/Legal Updates

October 24, 2024 8:45 AM – 12:00 PM

HIPAA/42 CFR Part 2

December 18, 2024 8:45 AM – 12:00 PM

Mandated Reporting

November 20, 2024 8:45 AM – 12:00 PM

IF YOU HAVE ANY QUESTIONS OR FOR MORE INFORMATION CONTACT
MCBH TRAINING TEAM AT 415 TRAINING@CO.MONTEREY.CA.US

Training Manager
Jill Walker

Training Clinician
Celia Trujillo

Training Assistant
Ariana Zamudio

MCBH TRAINING

MCBH Training would like to remind you of our upcoming **Cognitive Behavioral Therapy/Intervention** courses!

CE's offered for Psychologists & BBS!

- All the following courses are published on NeoGov Learn
- All courses are offered through ZOOM
- Additional info for each course can be found on NeoGov Learn

CBT Dx Series

Series consists of three 2-hour courses.

Learners need to enroll in each course in the series separately.

- **PTSD** (Sudak) 9:00 AM – 11:00AM
  - 10/7/2024 – Interviewing & Dx
  - 10/14/2024 – Conceptualization & Evidence
  - 10/21/2024 – Prolonged Exposure
  - 10/28/2024 – Cognitive Therapy

MCBH TRAININGS AT A GLANCE

September - October 2024

Date	Topic/Title: Follow Link to enroll on NeoGov Learn	Start Time	End Time	CE Credits
October 2024				
7	CBT: Dx Series - PTSD (Part 1 of 4)	9:00 AM	11:00 AM	BBS &BOP
9	CPI: Non-Violent Crisis Intervention	8:30 AM	4:30 PM	BBS & BOP
14	CBT: Dx Series - PTSD (Part 2 of 4)	9:00 AM	11:00 AM	BBS & BOP
16-18	Columbia Suicide Severity Rating Scale (C-SSRS): Foundations	8:45 AM	12:00 PM	BBS & BOP
16	LPS: 72-Hour Involuntary Holds: Qualification Course (5150/5585)	9:00 AM	12:00 PM	None
17	MI: Identifying & Mobilizing Change Talk	8:45 AM	12:00 PM	BBS & BOP
17	MI: Working with Groups	1:15 PM	4:30 PM	BBS
21	CBT: Dx Series - PTSD (Part 3 of 4)	9:00 AM	11:00 AM	BBS & BOP
22	CBT: Agenda Setting	8:45 AM	12:00 PM	BBS & BOP
22	CBT: Behavioral Activation	1:15 PM	4:30 PM	BBS & BOP
24	L&E: Legal Updates	8:45 AM	12:00 PM	BBS & BOP
28	CBT: Dx Series - PTSD (Part 4 of 4)	9:00 AM	11:00 AM	BBS & BOP
30	Sleep Coaching	1:00 PM	5:00 PM	BBS
31	Law & Ethics: Telehealth	8:45 AM	12:00 PM	BBS & BOP
November 2024				
18	CBT: Dx Series - Bipolar Disorder (FULL DAY)	8:45 AM	4:30 PM	BBS & BOP
19	CBT: Guided Discovery	8:45 AM	12:00 PM	BBS & BOP
19	CBT: Exposure Therapy	1:15 PM	4:30 PM	BBS & BOP
20	Law & Ethics: Mandated Reporting	8:45 AM	12:00 PM	BBS & BOP
20	LPS: 72-Hour Involuntary Holds: Qualification Course (5150/5585)	9:00 AM	12:00 PM	None
21	ACT: Acceptance & Commitment Therapy - Foundations	8:45 AM	4:30 PM	BBS & BOP
December 2024				
6	DEI: Cultural Humility - Foundations	9:00 AM	4:30 PM	BBS & BOP
9	CBT: Briefer Sessions	8:45 AM	4:30 PM	BBS & BOP
12	MI: MI as Trauma Informed Care	8:45 AM	4:30 PM	BBS & BOP
18	L&E: SUD - 42 CFR/HIPAA	8:45 AM	12:00 PM	BBS & BOP
18	LPS: 72-Hour Involuntary Holds: Qualification Course (5150/5585)	9:00 AM	12:00 PM	None

MYAVATAR TRAINING 2024

MYAVATAR
ONLINE TRAINING

OCTOBER 18, 2024
9AM TO 12PM

ALL SESSIONS 9:00 AM 12:00 PM	
MONTH	DAY
NOV	15
DEC	20

This course is an introduction on how to navigate the MyAvatar Electronic Health Records (EHR) system. Organized in a way that follows a client from admission to discharge in MyAvatar EHR.

The course offers training on how to log in to Avatar; search for clients; search for the various forms and reports available; and enter pertinent clinical information into the various forms in MyAvatar EHR.

- For assistance navigating myAvatar, please use the myAvatar User Guide for Specialty Mental Health Services available in the QI website under "User Guides"
- For **Non Clinical** Questions or technical assistance with myAvatar, email 415 QA@co.monterey.ca.us
- For **Clinical** Questions, email 415QI@co.monterey.ca.us

If you are not familiar with NEOGOV, *click here to view the "How to" Guide for NeoGov Learn* for support navigating the enrollment process.

NEOGOV

To access NeoGov Learn, enter through County INFONET: https://countyofmonterey.sharepoint.com/sites/Infonet/

- To request enrollment in DBT Skills: Foundations Training, please read and complete DBT Enrollment Request.

CONTACT US IN QUALITY IMPROVEMENT.

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