

Monitoring and improving client care

PURPOSE OF THE QUALITY IMPROVEMENT COMMITTEE

1. To provide internal oversight

The Quality Improvement Committee (QIC) through its subcommittees monitors the programs and services provided by the Mental Health Plan (MHP) providers. The QIC acts to assist in the department's compliance with State, Federal, and department rules and regulations. The essential focus of the oversight is to ensure that client care is competent and according to the client's rights and best interest.

2. Advisory to the Director

The QIC acts as an advisory committee for the County Mental Health Director assisting the Director in establishing Policy and Procedures and addressing areas needing improvement.

3. Work group

The QI/QM Quality Improvement/Quality Management workgroup is an ongoing workgroup establishing annual goals and objectives designed to provide management information and improved client care.

We Value Your Feedback

**Please let us know
how we are doing**

<https://www.surveymonkey.com/r/KF28C>

SCHEDULE OF MEETINGS

Quality Improvement Committee

July 27, 2017 – Ukiah
September 28, 2017 - Covelo
November 29, 2017–Ukiah/Fort Bragg
January 25, 2018 - Laytonville
March 14, 2018–Ukiah, Willits, Fort Bragg
May 31, 2018 – Potter Valley

3:30 PM until 5:30PM

Meetings are held in various locations throughout the county.

Speak Against Silence

**North Bay Suicide
Prevention Hotline**

1-855-587-6373

Mendocino County Mental Health Plan (MHP) offers free language and interpreter assistance, American Sign Language and California Relay Services (TTY/TDD) for beneficiaries requesting or accessing services. These services may be requested at any MHP provider site or by calling 1-800-555-5906

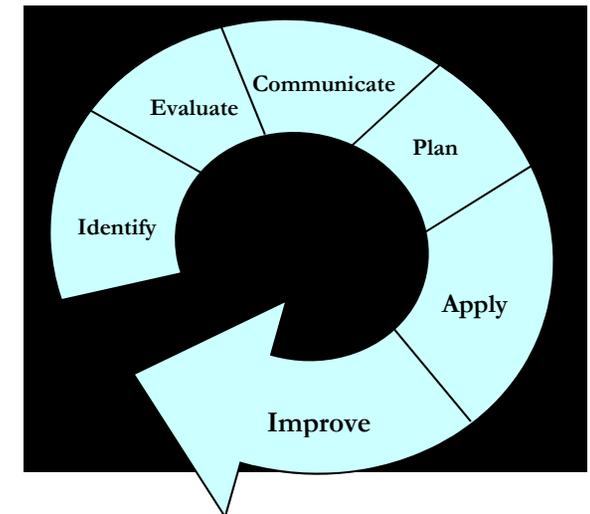
Please see the receptionist or call 1-800-555-5906 if you would like a brochure in a different format, also brochures are available at:

<http://www.co.mendocino.ca.us/hhsa/mentalhealth.htm>.

Brochures are available in English, Spanish, large print and audio.

MENDOCINO COUNTY MENTAL HEALTH QUALITY IMPROVEMENT COMMITTEE

Improving The Quality of Care



Consumers are welcome and encouraged to attend these meetings.

**Mental Health Plan 24 hour Access
1-800-555-5906 (Toll Free)**

Sí Usted Habla Español. Esta información está disponible en español, por favor vea la recepcionista o llame 1-800-555-5906

WHAT IS THE QUALITY IMPROVEMENT COMMITTEE (QIC)

Mission and Duties of QIC The overall mission of the Quality Improvement Committee is to effect a process of continuous meaningful improvement in the quality of services provided by the department, and under the Mental Health Medi-Cal Managed Care Plan through systematic and continuous evaluation of services provided, planning and, through the Director of Mental Health, effecting change in policies and procedures, measuring the effectiveness of those changes for permanent policy and procedure change.

SUBCOMMITTEES

Quality Improvement Committee shall provide oversight of the Quality Improvement (QI) program and makes recommendations and supports the decisions regarding the Mental Health Department's policies and procedures.

Peer Review Committee - Composed of all licensed clinical staff of the QIC. This subcommittee will receive and review all appeals from Managed Care Plan providers on adverse decisions. It shall also receive requests for peer review from the QIC when, in the opinion of the committee, there have been erroneous or serious complaints regarding an individual clinician, either staff employee or contract, through the complaint resolution process.

Cultural Competence Committee (CCC) shall provide oversight of cultural competency and linguistic services provided by the MHP providers. They monitor, review, evaluate and make policy recommendations to develop strategies to address disparities. The CCC notifies MHP providers and community partners of available trainings, workshops, and cultural events to increase knowledge and raise awareness about cultural diversity issues.

Behavioral Health Action Team (BHAT) is integrated into the QIC program through involvement in a general oversight and evaluation capacity. The BHAT reviews and evaluates MHP programs, and makes recommendations on policy changes and areas of improvement.

Quality Improvement / Quality Management Work Group (QI/QM) integrates the MCBHRS QI and MHP providers QI to allow for universal quality improvement across the MHP.

Utilization Management Group (UM) The Utilization Management Committee reviews that authorization decisions standards are being met and that there is consistency in the authorization process. The committee also assures that beneficiaries have appropriate access to services, evaluates the medical necessity, accessibility of services, appropriateness and efficiency of services, and assess the capacity of service delivery.

DUTIES

An annual evaluation of the overall effectiveness of the QI Program, demonstrating that QI activities have contributed to the meaningful improvement in the clinical care, client and Medi-Cal

beneficiary services, and describing completed and in-process QI activities.

The development of an Annual Quality Improvement Work Plan

Monitoring of previously identified issues, including tracking of issues over time

Monitoring the service delivery capability of the department and its Medi-Cal Managed Care Plan.

Monitoring the accessibility of services with the department and under the Managed Care Plan, setting QIC goals (in addition to state standards) for:

- Time lines of non-urgent mental health appointments.
- Time lines of services for urgent conditions.
- Access to after-hours care.
- Mechanisms to monitor access and responsiveness to the Managed Care Plan's 24-hour, toll-free number.

Monitoring client and beneficiary satisfaction
Monitoring the departments and Managed Care Plan's service delivery system and meaningful clinical issues affecting beneficiaries, including the safety and effectiveness of medication practice.

Monitoring continuity and coordination of care with physical health care providers and other human service agencies.
Monitor complaint/grievance resolution efforts and consumer or provider appeals.

Call (707) 472-2360