



Stacy Kuwahara, LMFT, Director

Kern County Behavioral Health Board  
System Quality Improvement Committee

Monday, March 22<sup>nd</sup>, 2021

4:00-5:00 PM

Virtual Meeting VIA Teams

Meeting Minutes

*The mission of the System Quality Improvement Committee (SQIC) is to review and evaluate Mental Health Plan (MHP) activities and where appropriate, make recommendations regarding policy decisions, institute needed Quality Improvement (QI) actions, or/and ensure follow-up of QI processes.*

		<i>Present</i>	
X	David Kessler	BHB-Chairperson	X Jon Casida
X	Alexander Lopez	KernBHRS-SUD	X Jose Gomez
X	Amber Lopez	KernBHRS-SUD QID	X Lesleigh Davis
X	Andrea Dabrushman	KernBHRS-QID IT	X Liz Bailey
X	Chelcy Gibbons	KernBHRS-Cultural Competence	X Marisa Garcia Trebizo
X	Courtney Isaac	KernBHRS-Patients' Rights	X Melanie Olcott
X	Cynthia Jackson	KernBHRS-QID Support	X Rafael Lopez
X	Eryka Campos	KernBHRS-CMR	X Richard Hofferd
X	Gregory Gonzalez	KernBHRS-SUD	X Sarah Gutierrez
X	Ivan Carrasco	KernBHRS-QID IT	X Tammy Cates
X	Jerrold Montelongo	KernBHRS-QID Support	X Tara Christian
X	John French	KernBHRS-SUD Specialty Services	X Vivian Reyes
			KernBHRS-RSA CAC/SET
			KernBHRS-Crisis Services CCMO
			KernBHRS-QID Administrator
			KernBHRS-Medical Services
			CSV-QI-Director
			KernBHRS-SUD QID
			KernBHRS-SUD QID
			BHB Member
			KernBHRS-QID
			KernBHRS-SET
			KernBHRS-KLD
			KernBHRS-Youth MIST & CSOC

1. **Welcome and Introductions** – David Kessler welcomed the attendees.
2. **Review and approval of February 2021 Minutes** – The previous meeting minutes were approved unanimously.
3. **Public Comment** – No public comment was made.
4. **New Business** – There was no new business to be discussed at this time.
5. **Guest Presenter – Survey Treatment Perception Survey** – Andrea Dabrushman
  - a. The TPS was completed in November 2020, due to a holiday there were 4 days most clinics were able to survey the clients. Counties are required to administer the TPS under the Drug Medi-Cal-Organized Delivery System waiver evaluation. This fulfills the EQRO requirement related to conducting client satisfaction surveys using a validated tool. Collected information is used to measure consumer perception to access and quality of care along with evaluating and improving consumer experience. Approximately 557 surveys were completed by clients with an overall satisfaction rating of 91%. Due to the pandemic surveys were conducted via the phone or online and entered directly into the UCLA database.
6. **Guest Presenter – Privacy and Compliance** – Sarah Gutierrez
  - a. There have been incidents in the news where individuals working in behavioral health programs are billing incorrectly or fraudulently. In the last 4 months, 3 incidents involving false claims were investigated. Engaging in false claims is a crime and could result in providers being placed on an “Exclusion List”. This could affect the whole system of care. Please contact the Privacy and Corporate Compliance office if you suspect any fraudulent activities.
7. **Guest Presenter – Clinical and Non-Clinical PIP** – Ivan Carrasco
  - a. PIPS are reported each year to EQRO. These projects help work on system problems. These are broken down into 2 categories; clinical and non-clinical. There is 1 of each for mental health and substance use. The active PIPS are attached. Anyone who would like to participate in PIPs can email Ivan Carrasco.
8. **Quality Improvement Division** – Lesleigh Davis
  - a. Focus groups were held regarding co-server notes, there are possible changes coming to this process.
  - b. The SUD EQRO Review will be taking place April 13<sup>th</sup> through April 15<sup>th</sup>.
  - c. The Electronic Health Record will eventually be available in a portal for clients to access easily.
  - d. There are changes coming to records review laws, clients will have more access to their records. This is still at the policy level.
  - e. The standard for documentation timeliness is changing, the new standard is 85% will be done in 5 days and 100% will be done in 14 days. If there are any recommendations to help implement these changes, please email Lesleigh Davis.



9. **Department Supports Admin. Ethnic Services Manager** – Chelcy Gibbons
  - a. May is Mental Health month and events are being planned.
  - b. May is Asian Pacific Islander (API) month and an event is being planned to celebrate all the different cultures that make up API.
  - c. Currently working on revisions to cultural competence annual plan training. This is being used as a method to discuss requirements and CLAS Standards.
10. **Substance Use Division** – Alexander Lopez
  - a. Tarzana in Palmdale has been added as a SUD Provider allowing the opportunity to provide services to the adolescent population.
11. **Adult System of Care** – Jon French
  - a. The Independent Placement Support (IPS) is now accepting clients within Homeless Adult Team (HAT), Adult Transition Team (ATT), and Transition Age Youth (TAY).
12. **Children’s System of Care** – Vivian Reyes
  - a. In the month of March, The Family Urgent Response System was launched. This is a 24/7 hotline for caregivers of foster children.
13. **Kern Linkage Division** – Tara Christian
  - a. There were no updates at this time.
14. **Crisis Services** – Jose Gomez
  - a. The tents at Mary K. Shell have been taken down, they are ready to be put back up if needed.
15. **Medical Services** – Liz Bailey
  - a. There were no updates at this time.
16. **Recovery Support Admin.** – Jon Casida
  - a. The Self-Empowerment Team (SET) and Assertive Community Treatment (ACT) are focusing on high acuity clients, no shows and hospital visits are being observed. Home visits are arranged if needed.
17. **Consumer Family Learning Center** – Jon Casida
  - a. Attendance has increased recently. Follow up contact is initiated within 24 hours. Virtual groups are doing well.
18. **Provider Updates**
  - a. Clinica Sierra Vista – Marisa Garcia Trebizo – There were no updates at this time.
19. **Quality Improvement Committee** – There were no recommendations at this time.
20. **Unfinished Business** – There was no unfinished business to be reported on.
19. **Adjourn** – Next scheduled meeting April 26<sup>th</sup>, 2021 at 4:00 – 5:00 PM, will be virtual via Teams.

**This meeting is MH UR Code 3**



# Fall 2020 Treatment Perception Survey (TPS)



Overview

March 2021

# About the Report

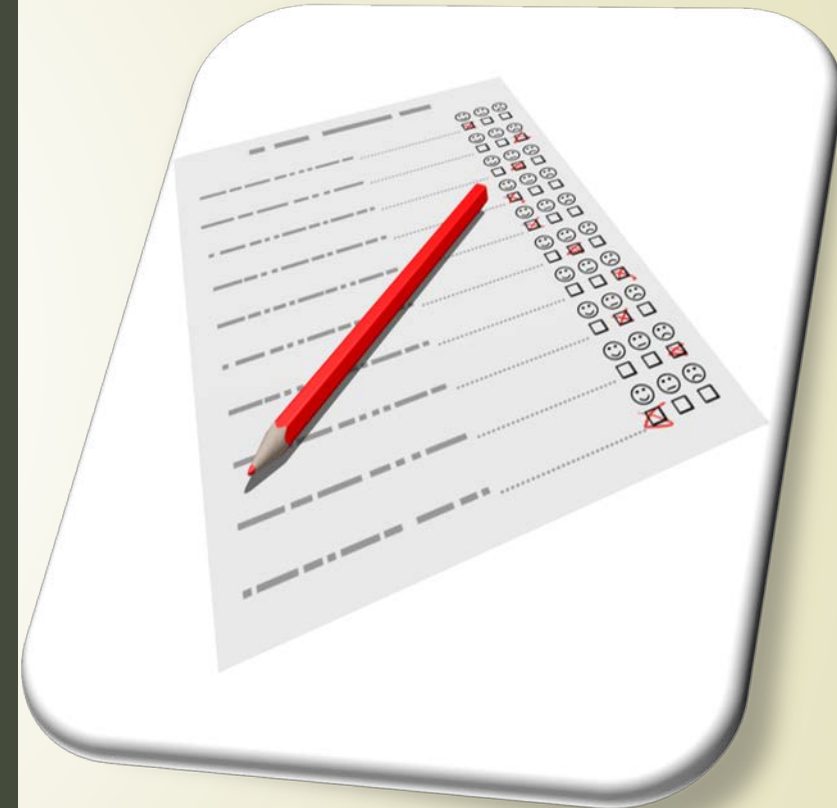
## ► Overview:

Counties are required to administer the Treatment Perception Survey (TPS) as part of the Drug Medi-Cal Organized Delivery System (DMC-ODS) waiver evaluation. Administration of the TPS also fulfills the county's External Quality Review Organization (EQRO) requirement related to conducting a client satisfaction survey using a validated tool. The collected information is utilized to measure consumers' perceptions of access to services and quality of care, and to evaluate and improve the consumer experience. The TPS is administered in the fall of each year, and includes Adult and Youth versions in both English and Spanish.\*

Approximately 557 TPS's were completed by consumers in November 2020, with an overall satisfaction rating of 91%.\*\*

*\*A total of three (3) Youth surveys were completed this survey round. As the number of completed Youth surveys total less than five (5), The University of California, Los Angeles (UCLA), who acts as TPS administrator for all California counties, did not provide an individual report.*

*\*\*As a result of the COVID-19 pandemic, the Fall 2020 TPS round was administered entirely online and via telephone. KernBHRS SUD clinic staff and Contractor SUD clinic staff distributed fliers containing the telephone number/access code and online survey links to clients who presented in person, and also contacted their clients telephonically, recording their survey responses directly into the UCLA online database.*



# TPS Standards

## Standard:

A. Response Rate: Substance Use Disorder (SUD) clinics will survey a minimum of ten percent (10%) of their caseload at a point in time determined by QID.\*

*\*As a result of the COVID-19 pandemic, clinics were not held to the 10% minimum standard for the Fall 2020 survey round.*

B. Satisfaction Rate: SUD clinics will maintain an overall satisfaction rate of 85%.

Data Source: Treatment Perception Survey; Cerner (used to determine caseloads).

## Numerator:

A. Response Rate: The number of completed surveys.

B. Satisfaction Rate: The sum of clients who responded "Strongly Agree" or "Agree" to the twelfth question of the TPS, which is, "Overall, I am satisfied with the services I received."

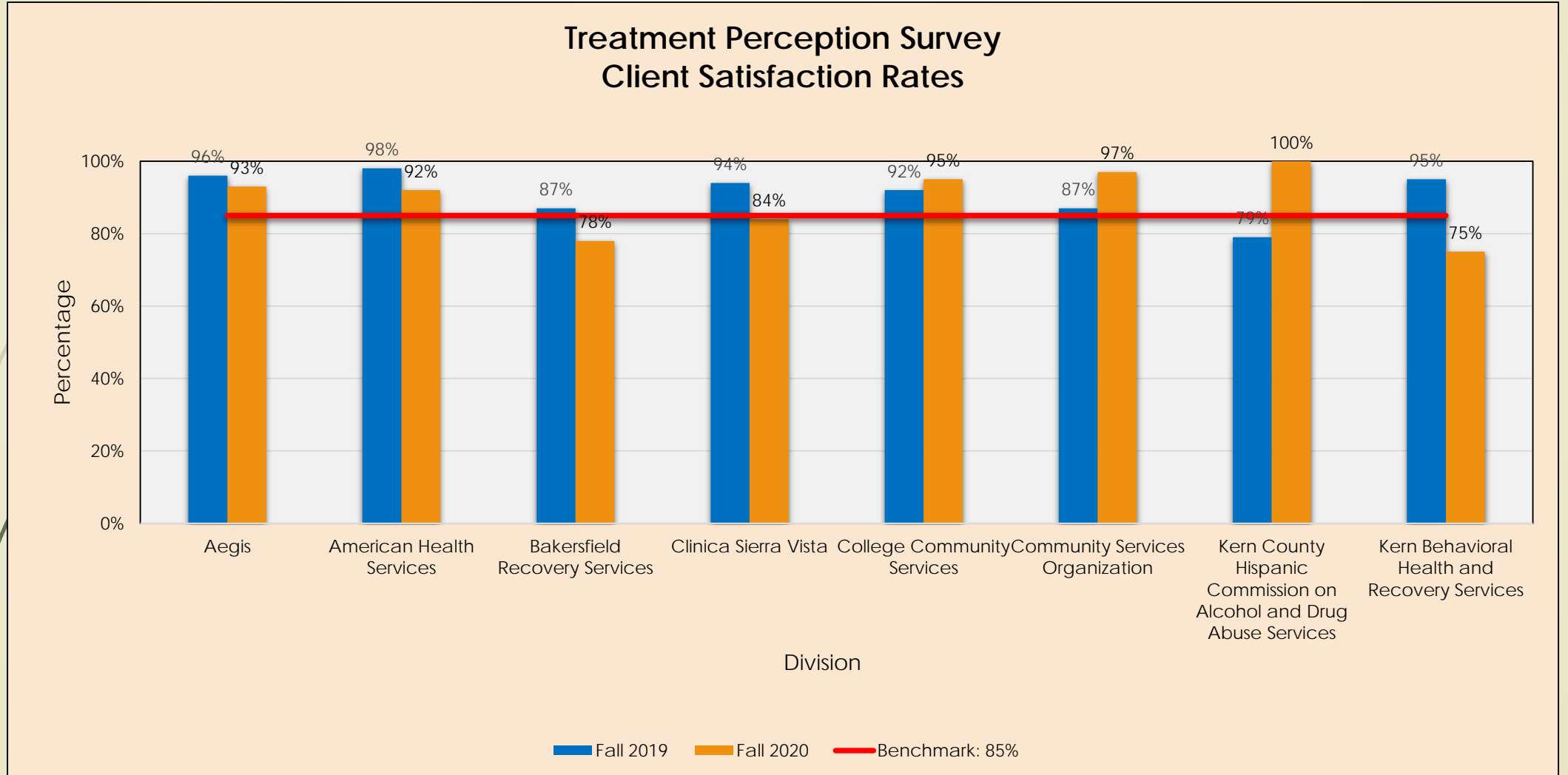
## Denominator:

A. Response Rate: The total caseload at a point in time determined by QID.

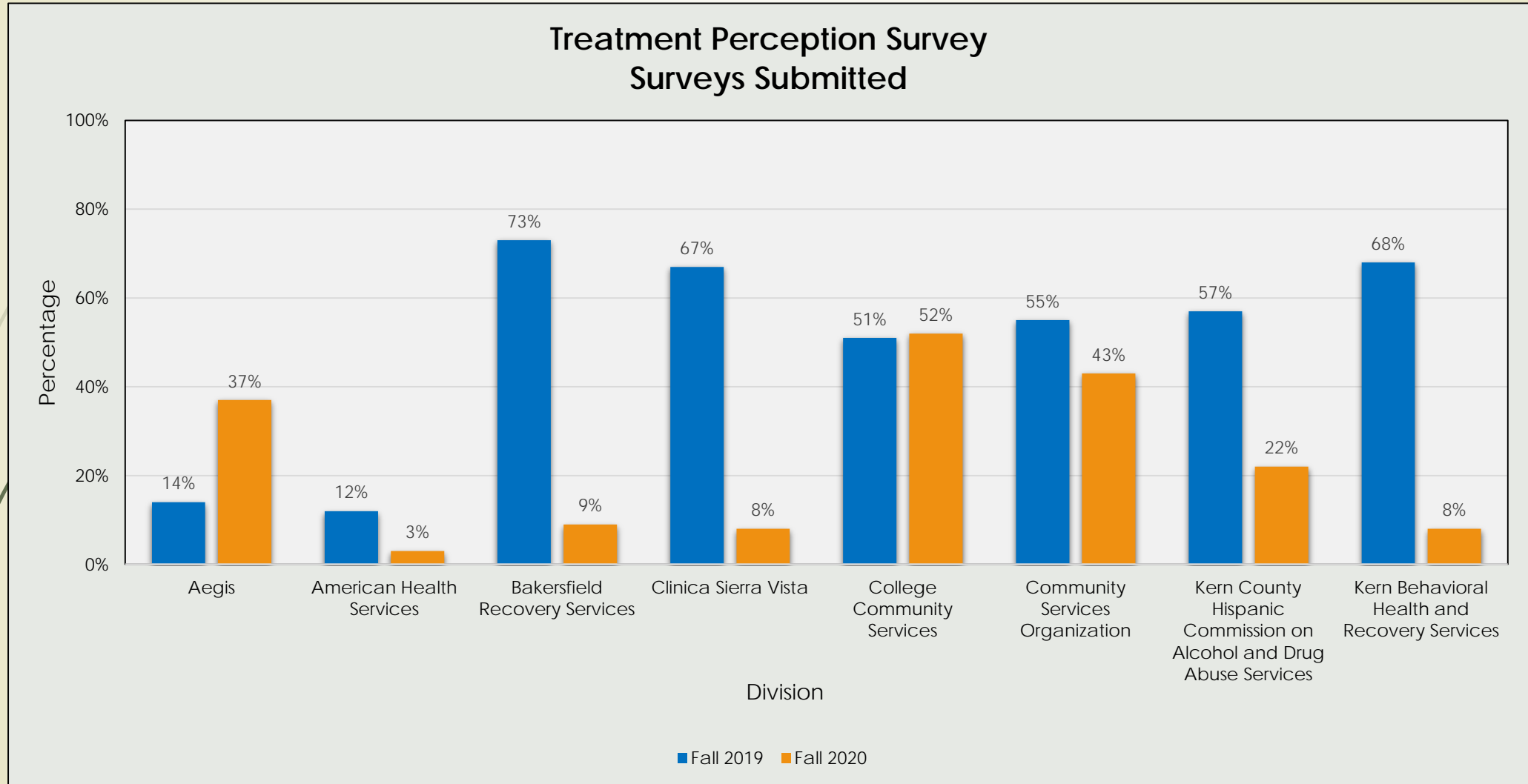
B. Satisfaction Rate: The number of responses to the twelfth question of the TPS, excluding responses of "Not Applicable."



# Overall Satisfaction Rates



# Surveys Submitted





## Contact Information

- ▶ **Andrea Dabrushman**  
Behavioral Health Planning Analyst  
(661) 302-7177 cell  
[ADabrushman@KernBHRS.org](mailto:ADabrushman@KernBHRS.org)
- ▶ **Ivan Carrasco**  
Behavioral Health Unit Supervisor  
(661) 333-1987 cell  
[ICarrasco@KernBHRS.org](mailto:ICarrasco@KernBHRS.org)

# March Staff Training Points

## Fraud and False Claims Making Headlines

- According to the Office of Inspector General, on March 4, 2021 Florida Attorney General announced the arrest of a **Behavior Health Analyst** who allegedly defrauded Florida's Medicaid program. The behavioral health employee falsified the dates and the times on progress notes totaling more than \$6,800 in false claims paid by the Medicaid program. The former employee is charged with one count of Medicaid fraud and if convicted faces five years in prison.

## Why is this important?

- In the last four months, the Privacy and Corporate Compliance office has investigated three compliance incidents involving false claims.
- Engaging in false claims is a crime and could result in providers being placed on an "Exclusions List." If placed on an exclusions list, the provider would not be able to provide services in an agency that is funded by federal dollars.
- It is the duty of all staff to uphold the KernBHRS Code of Ethics, Kern County Code of Conduct and the KernBHRS Corporate Compliance Program.

## What can you do?

- Always document a true account of the services provided
- Always contact the Privacy and Corporate Compliance office (contact information is listed below) if you suspect any fraudulent activities taking place
- Always ask questions if you are unsure about how to document a service

## Who do I contact?

- **Dawn Milton-Privacy and Corporate Compliance Officer;** [dmilton@kernbhrs.org](mailto:dmilton@kernbhrs.org); 661.3019119
- **Sarah Gutierrez-BH Program Supervisor;** [sgutierrez@kernbhrs.org](mailto:sgutierrez@kernbhrs.org); 661.809.9205
- **Privacy/Compliance Hotline:** 661.868.8222
- **Anonymous Hotline:** 661.868.6868

## KBHRS PIP Update

KBHRS runs four Performance Improvement Projects (PIP) each year and reports the information to the External Quality Review Organization (EQRO). These projects are used to help different parts of our system improve. They are broken down into two categories; Clinical and Non-Clinical. There is one of each for mental health and substance use. Here is the question for each of our current PIPs:

- MH Clinical: Does EMDR help reduce depression, anxiety, and subjective trauma?
- SUD Clinical: Does a shortened Seeking Safety group help people stay engaged in treatment?
- MH Non-Clinical: Does using mobile devices help reduce no-show rates for psychiatric appointments?
- SUD Non-Clinical: Does providing an access point to immediately link people with urgent/emergent need to services improve their ability to remain in services?

These PIPs are all active and we will be following up with EQRO in our next evaluation. They will tell us if we can make changes to these and continue to use these PIPS, or if we need new ones.

### Questions for you?

Have you ever heard of a PIP before?

What are some different ways to get feedback on potential PIPs on an ongoing basis?

Would any of you be interested in participating in a PIP PIP on getting more PIPs? Please reach out to Nina at [Ntepidrzyhan@kernbhrs.org](mailto:Ntepidrzyhan@kernbhrs.org).



BEHAVIORAL  
**HEALTH & RECOVERY**  
SERVICES

Director Stacy Kuwahara, LMFT  
PO Box 1100, Bakersfield, CA 93302  
P: 661-868-6600 • F: 661-861-1020  
[www.KernBHRS.org](http://www.KernBHRS.org) • @KernBHRS on 