



Stacy Kuwahara, LMFT, Director

Kern County Behavioral Health Board
System Quality Improvement Committee

Monday, April 26th, 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.

Present

| | | | |
|----------------------|-------------------------------|-------------------------|----------------------------|
| X David Kessler | BHB-Chairperson | X Leigh Davis | KernBHRS-QID Administrator |
| X Alexander Lopez | KernBHRS-SUD | X Liz Bailey | KernBHRS-Medical Services |
| X Andrea Dabrushman | KernBHRS-QID IT | X Marisa Garcia Trebizo | CSV-QI-Director |
| X Chelcy Gibbons | KernBHRS-Cultural Competence | X Melanie Olcott | KernBHRS-SUD QID |
| X Cynthia Jackson | KernBHRS-QID Support | X Rafael Lopez | KernBHRS-SUD QID |
| X Gregory Gonzalez | KernBHRS-SUD | X Shannon Tolar | KernBHRS – Program Support |
| X Jerrod Montelongo | KernBHRS-QID Support | X Tammy Cates | KernBHRS-SET |
| X Jonathan Monsibais | KernBHRS-Patients’ Rights | X Tara Christian | KernBHRS-KLD |
| X Jose Gomez | KernBHRS-Crisis Services CCMO | | |

1. **Welcome and Introductions** – David Kessler welcomed the attendees.
2. **Review and approval of March 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 – QID Reports/Workplan** – Lesleigh Davis
 - a. The work plan is a state mandated plan to help meet client satisfaction and can be found online on the public website. The QAPI (Quality Assessments and Performance Improvement) is a central point in how information is used to improve efficiency and effectiveness. Having a work plan will help keep accountability by creating goals. Goals focus on quality assurance to make sure services are met and Quality Improvement to better meet client satisfaction.
6. **Guest Presenter – Grievances and Appeals** – Jonathan Monsibais
 - a. Jonathan Monsibais goes over the grievance and appeal system regulations. A grievance is a beneficiary’s expression of dissatisfaction about any matter other than an Adverse Benefit Determination. When a grievance is received a NOABD (Notice of Adverse Benefits Determination) is sent out allowing the beneficiary to send an appeal to review the decision. Jonathan Monsibais and Desiree Chairez will be doing routine checks to make sure the grievance/appeal process is done correctly. Providers may request a supervisor when appealing to a grievance to try to resolve the issue and if a supervisor does speak with a provider, they should notify Patients’ Rights to keep an updated log. Grievances are a way to make sure that clients are being heard and to help improve the services provided. In SharePoint there is a Grievance and appeal app that is currently only available to supervisors. There is a new Patients’ Rights supervisor, Courtney Isaac. If anyone would like to report a grievance or concern anonymously it can be done by contacting 844-380-8250 and to include as much information as possible and that you would like to remain anonymous.
7. **Quality Improvement Division** – Lesleigh Davis
 - a. The DMC-ODS (Drug Medic-Cal Organized Delivery System) system is still in the early stages but it is showing good progression. A focus group of individuals who get their notes in consistently were brought together to help make changes to the Co-server notes for better usage. There was change in the progress notes timeliness which will go live July 1, 2021. The change will allow for 5 calendar days instead of 2 for 85% note completion and will have up to 14 days to complete the remaining 15%. New Legislation will be coming sometime in the future giving clients more rights to access their charts.



8. **Department Supports Admin. Ethnic Services Manager** – Chelcy Gibbons
 - a. New ethnic services coordinator is Estrella Amaro
 - b. Updates are coming for the Ethnic competence and Cultural change training to assist those who were having difficulties.
 - c. The CCRC Meeting was moved up a week from April 15th to the April 8th.
9. **Substance Use Division** – Gregory Gonzalez
 - a. Referrals for adolescent's treatment services are in motion. Received a notice from DHCS which removed the limit on residential stays.
10. **Adult System of Care** – Jon French
 - a. No New Updates
11. **Children's System of Care** –
 - a. No New Updates
12. **Kern Linkage Division** – Tara Christian
 - a. There is a new system ROEM (Relational Outreach and Engagement Model) which is an extension of the HAT (Homeless Adult Team). Two vans are sent out to the Oildale and Downtown areas to engage with the homeless to build a relationship and help them reach out for services on their own.
13. **Crisis Services** – Jose Gomez
 - a. No New Updates
14. **Medical Services** – Liz Bailey
 - a. No New Updates
15. **Recovery Support Admin.** – Shannon Tolar
 - a. On 4/27/2021 at the Board of Supervisors Meeting our director, Stacy Kuwarhara, will bring attention to the flood contract being renewed and an update on the programs that are being worked on.
16. **Consumer Family Learning Center** –
 - a. No New Updates
17. **Provider Updates** – Marisa Garcia Trebizo
 - a. No New Updates
18. **Quality Improvement** – Lesleigh Davis
 - a. No new Updates
19. **Unfinished Business** –
 - a. No unfinished business
20. **Adjourn** – Next scheduled Meeting is May 24th, 2021 at 4:00-5:00 PM, will be virtual via Teams.



Kern County Behavioral Health Board
System-wide Quality Improvement Committee

Monday, April 26th, 2021

4:00-5:00 PM

Virtual Meeting VIA Teams

Agenda

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.

This meeting is recorded

- | | |
|---|------------|
| 1. Welcome and Introductions | 1 Minute |
| 2. Review and approval of March 2021 Minutes | 2 Minutes |
| 3. Public Comment – This is reserved to address the Committee on matters not on this agenda within the Committee’s jurisdiction. Members may respond briefly to statements made or questions posed and may ask a question for clarification; ask staff for information or to report back to the Committee at a later meeting as a matter of business. | 3 Minutes |
| 4. New Business – Report on New Business | 1 Minute |
| 5. Guest Presenter – QID Reports/Workplan – Lesleigh Davis | 10 Minutes |
| 6. Guest Presenter – Grievances and Appeals – Courtney Isaac/Jonathan Monsibais | 10 Minutes |
| 7. Quality Improvement Division – Lesleigh Davis – Report on current projects and current issues | 3 Minutes |
| 8. Department Supports Admin. Ethnic Services Manager – Report on current projects and current issues | 3 Minutes |
| 9. Substance Use Division – Report on current projects and current issues | 3 Minutes |
| 10. Adult System of Care – Report on current projects and current issues | 3 Minutes |
| 11. Children’s System of Care – Report on current projects and current issues | 3 Minutes |
| 12. Kern Linkage Division – Report on current projects and current issues | 3 Minutes |
| 13. Crisis Services – Report on current projects and current issues | 3 Minutes |
| 14. Medical Services – Report on current projects and current issues | 3 Minutes |
| 15. Recovery Support Admin. – Report on current projects and current issues | 3 Minutes |
| 16. Consumer Family Learning Center – Report on current projects and current issues | 3 Minutes |
| 17. Provider Updates – Report on current projects and current issues | 3 Minutes |
| 18. Quality Improvement – SQIC recommendations to the Executive Quality Improvement Committee (QIC) | 1 Minute |
| 19. Unfinished Business – Report on Unfinished Business | 1 Minute |
| 20. Adjourn – Next scheduled meeting May 24 th , 2021 at 4:00 – 5:00 PM, will be virtual via Teams. | 1 Minute |

This meeting is MH UR Code 3





System Quality Improvement Committee

Ongoing feedback is **crucial** to meeting client needs.
That's where **you** come in.

Every month, the **System Quality Improvement Committee (SQIC)** meets to review and discuss the quality improvement activities of the behavioral health system. Regardless of the role you play in this field, we need **your** input.

Next Meeting!

**April
26**

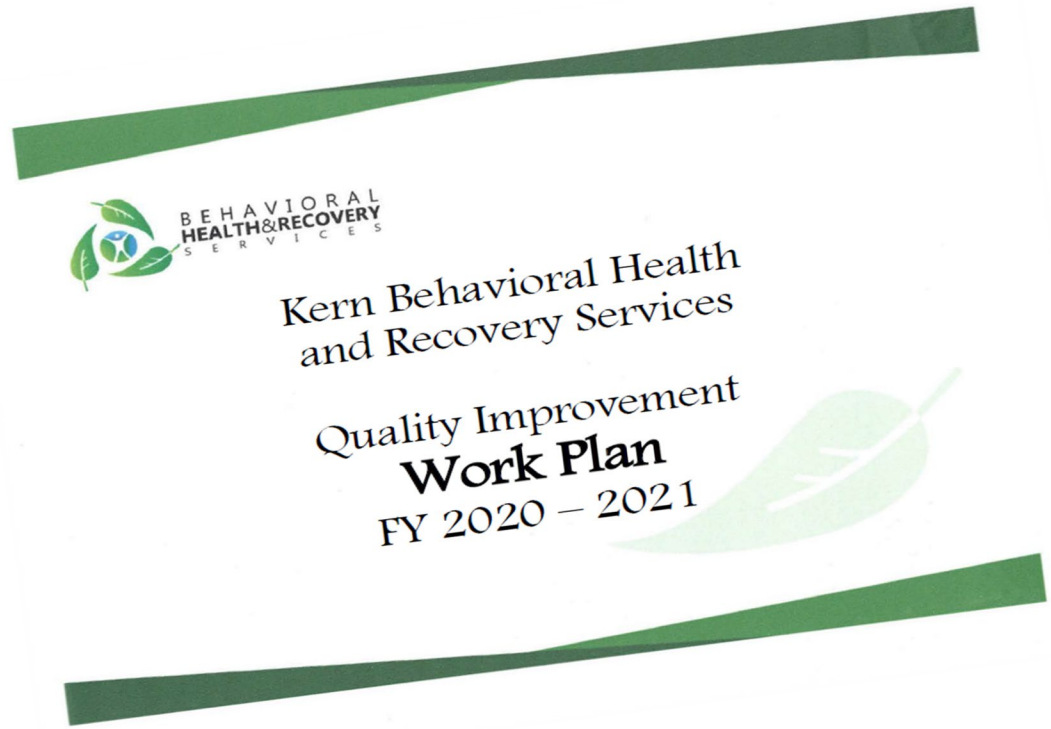
4-5 p.m.
Microsoft Teams

Everyone's invited

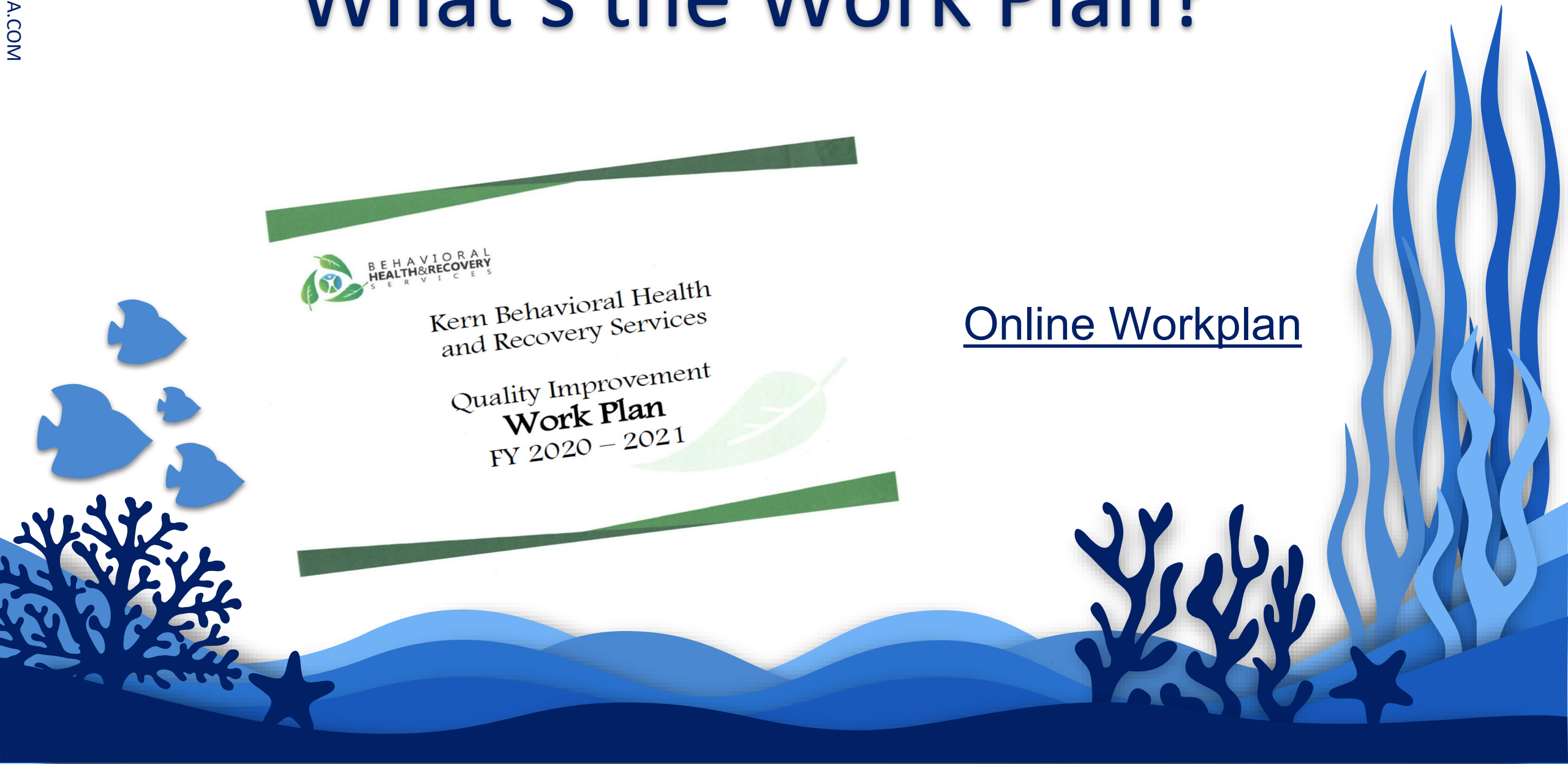
- Consumers
- Family members
- Direct service staff
- Quality improvement staff
- Community

For more information, contact QID Support at QIDSupport@kernbhrs.org.
SQIC is a subcommittee of the Behavioral Health Board and the Executive Quality Improvement Committee.

What's the Work Plan?



[Online Workplan](#)

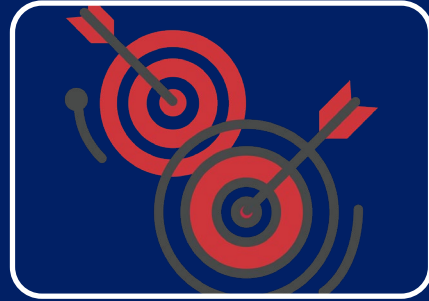


Why a Work Plan?

- Mandated
- Describe QAPI
- Accountability



What's in the Work Plan?



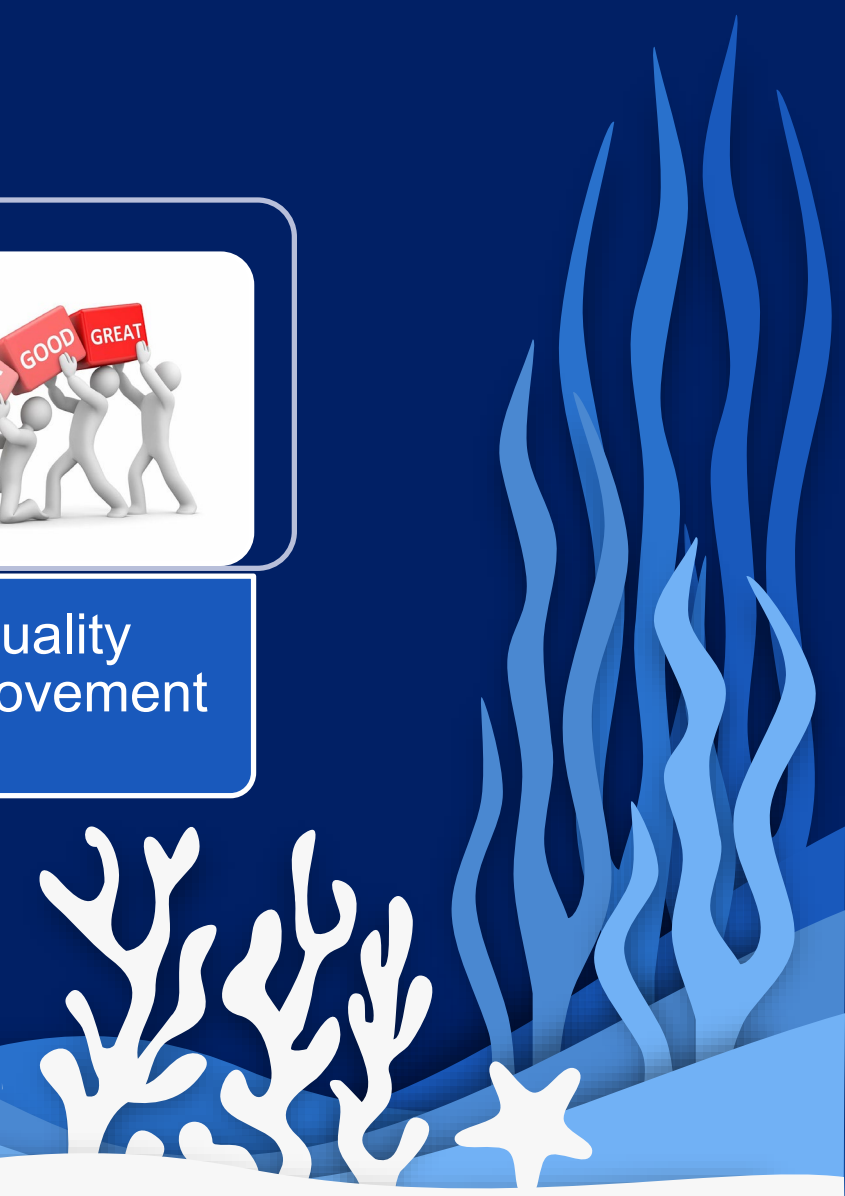
GOALS



Quality Assurance



Quality Improvement





BEHAVIORAL
HEALTH & RECOVERY
SERVICES

GRIEVANCE & APPEAL SYSTEM

PATIENTS' RIGHTS OFFICE



Grievance and Appeal System Regulations

- **Regulated by the State of California, Department of Health Care Services (DHCS)**
- **Federal Managed Care Requirement** for all Mental Health Plans (MHP) and Drug Medi-Cal Organized Delivery Systems (DMC-ODS). Aka: The Plan
- **Kern BHRS** is the MHP for Kern County and a DMC-ODS county.



What is a Grievance?

- **Grievance** – A beneficiary’s expression of dissatisfaction about any matter other than an Adverse Benefit Determination. *(Adverse Benefit Determination defined on next slide).

The definition specifies that grievances may include, but are not limited to, the quality of care or services provided, aspects of interpersonal relationships, such as rudeness of a provider or employee, failure to respect the beneficiary’s rights, regardless of whether remedial action is requested.



What is an Appeal?

- **Appeal** – A review by the Plan of an Adverse Benefit Determination (formally known as an action).

An Adverse Benefit Determination is defined to mean any of the following actions by the Plan:

1. Denial or limited authorization of a requested service, including determinations based on the type or level of service, medical necessity, appropriateness, setting, or effectiveness of a covered benefit;
2. The reduction, suspension, or termination of a previously authorized service;



(continued...) Adverse Benefit Determination actions by the Plan:

- 3.** The denial, whole or in part, of payment for a service;
- 4.** The failure to provide services in a timely manner;
- 5.** The failure to act within the required timeframes for standard resolution of grievances and appeals; or
- 6.** The denial of a beneficiary's request to dispute financial liability.



Provider response to a grievance or appeal

- Know Policy 10.1.3 Grievance & Appeal System.
- Inform the beneficiary of the Plan's Grievance and Appeal System; forms provide at all Kern BHRS and contracted provider locations.
- Offer to assist the beneficiary with their concerns, provider supervisor to notify Patients' Rights Office using the Grievance and Appeal Management Web Application.
- Provide beneficiary with Patients' Rights main office phone number: 844-360-8250 to file the grievance directly.



Inform the Patients' Rights Office

- The Patients' Rights Office is responsible for maintaining the Plan's Grievance & Appeal Log.
***Patients' Rights does not resolve grievances or appeals; the provider supervisor is responsible for providing resolutions.**
- Notify the Patients' Rights Office of all grievances or appeals using the Grievance and Appeal Management Web Application within one day of receiving the grievance or appeal (Additional training material available).



Anonymous Staff Reporting

- Staff may also report grievances or concerns anonymously by contacting the Patients' Rights Office at 844-360-8250.

*Please indicate that you would like to remain anonymous and provide as much detailed information as possible.



Grievance & Appeal System Contacts

- **Patients' Rights Office main line:** toll free (844) 360-8250
- BHRSPatientsRights@kernbhrs.org
- **Dissary Chairez:** (661) 868-5167
- **Jonathan Monsibais:** (661) 868-5110
- **Courtney Isaac:** (661) 852-1115
- **You may also contact the above staff via Microsoft Teams**