



Bill Walker, LMFT, Director

Kern County Behavioral Health Board
System Quality Improvement Committee

Monday, July 27, 2020

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

A	BHB-Chairperson	A	Deborah Fabos	BHB-Co-Chairperson
X	April Gonzalez	X	Lesleigh Davis	KernBHRS-QID Administrator
X	Ben Rutherford	X	Lorena Boykins	KernBHRS-SUD Admin.
X	Brandy Larsen	X	Marisa Garcia Trebizo	CSV-QI-Director
X	Chelcy Gibbons	X	Sarah Gutierrez	KernBHRS-QID Privacy and Compliance
X	Courtney Isaac	X	Selma Gonzalez	KernBHRS-QID Support
X	Cynthia Jackson	X	Shanda Henry	KernBHRS-QID Support
X	Diana Najera	X	Shannon Tolar	KernBHRS-RSA
X	Donna Robinson	X	Tammy Cates	KernBHRS-RSA & SET
X	John French	X	Tara Christian	KernBHRS-KLD ATT
X	Jon Casida	X	Tonya Mann	KernBHRS-Crisis Services Administrator
X	Jose Gomez	X	Vivian Reyes	KernBHRS-Youth MIST & CSOC
X	Karina Leonzo-Castillo	X	Yolanda Rosas	KernBHRS-CFLC

1. **Welcome and Introductions** – Lesleigh Davis welcomed the attendees and conducted introductions.
2. **Review and approval of June 2020 Minutes** – This was not discussed due to the absence of a BHB Chairperson.
3. **Public Comment** – No public comment was made due to the absence of a BHB Chairperson.
4. **New Business** – There was no new business to be discussed at this time.
5. **Guest Presenter – Ty Hudgens – Privacy and Compliance** – Sarah Gutierrez has joined the QID team and filled in.
 - i. A memo issued on July 14th outlines changes to several processes relating to consent. The views are positive, and this has been helpful. Some contractors had not received it. Lesleigh stated that they would be sent to them directly.
 - ii. There was an email sent regarding Email Encryption changes effective July 23rd. A quick guide is not available however will be released at a later date on SharePoint. The view on this is that it seems much easier to use.
 - iii. There have been some changes to Policy 10.1.10; Confidentiality of the PHI/PI/PII of Deceased Clients. The policy can be viewed via SharePoint, for anyone who needs to view these updates. An attachment has also been added for Parental Declaration.
 - iv. There were 36 reviewed Sequestered Records. There were 78 uses of the Break the Glass, all deemed appropriate. There was 1 privacy incident reported to the state.
6. **Guest Presenter – Karina Leonzo-Castillo – Documentation standards COVID flexibilities/Progress note revision**
 - i. Changes have been made regarding verbal consent since the start of the stay at home order. Initially it was expected that verbal consent would be obtained and that when we went back into the office, a physical signature would be obtained, however, we will not be required to get signatures until the forms expire.
 - ii. Progress note revision – QID would like to make changes that make it easier to provide services and less time can be spent on entering services. They have been researching other counties and as of right now there is no start date.
7. **Mental Health Quality Improvement Division** – Lesleigh Davis – Report on current projects and current issues
 - i. A focus group is being formed with the question being; what gets in the way of your ability to provide direct services?
Feedback from attendees is shown below.
 - a. Tara Christian – The standard ROIS take approximately 45 minutes to do, this is not including additional rare ROIS per client.
 - b. Diana Najera – Treating the chart; this refers to so much paperwork. QIC’s in particular take up much needed time.
 - c. John French – Chart reviews; very time consuming with annual chart reviews. This is done differently now.
 - d. Vivian Reyes – Annual paperwork, releases, privacy practices, UMDAPS, discharges.
 - e. Courtney Isaac – New client to the system of care: ROI’s, privacy practices, consent for treatment.
 - ii. Beginning preparation for MH EQRO Review. This upcoming year they would like to do it remotely. There will be more information.
 - iii. SUD and MH QQID will be on Friday, July 31, 2020.





8. **Department Supports Admin. Ethnic Services Manager** – Chelcy Gibbons
 - i. July is BIPOC (Black, Indigenous, and People of Color) mental health month; formerly known as minority mental health month. They are changing the messaging to reinforce the commitment to diversity and unity.
 - ii. There are now over 145 KernBHRS and Relias trainings within Relias. We are also partnering with statewide evidence-based trainings with California Institute of Behavioral Health Solutions, so that we can provide effective telehealth services to all clients.
 - iii. Currently working on annual cultural competence plan. There will be more to come on this at future meetings.
9. **Substance Use Division** – Lorena Boykins/Brandy Larsen
 - i. The number of beds for Residential Services are expanding. The RFP is now concluded, and they are finalizing contracts. Contractors will include BRS, Legacy Village, Tarzana treatment centers, and West care. These beds will now be at 80 capacity with a 3.3 level of care. Tarzana in Palmdale will be adding adolescent residential.
 - ii. Two recovery stations have opened; in Bakersfield and in Lamont. If any information is needed please contact Lorena.
 - iii. SUD Services have embraced the virtual services, such as providing over the phone and zoom, and zoom groups.
 - iv. Gateway is down a team member.
10. **Adult System of Care** – Jon French
 - i. Eating disorder consults has been moving forward. A referral form has been created and Children’s has one request for a consult.
 - ii. EMDR will have its upcoming training in October/November.
 - iii. The flyer has gone out for staffing interest for the center for gender sexuality. Two staff members will be chosen to work with the center for the next six weeks.
 - iv. Survey and staff reports continue to be monitored to review ways to support staff during the redesign amid Covid19.
11. **Children’s System of Care** – Vivian Reyes
 - i. There is a group every week that goes into the office; limited to 4 staff to conduct services via telephone.
 - ii. Treatment foster care program will be training nine new foster parents for the program.
 - iii. They are looking for referrals for anger management group for teens via zoom.
12. **Kern Linkage Division** – Tara Christian
 - i. Currently in the process of working with parole to help with acute clients, due to parole budget cuts.
 - ii. HAT is working with homeless shelters and remain on site at low barrier shelter.
 - iii. ATT is in the process of getting virtual group up and running.
13. **Crisis Services** – Tonya Mann
 - i. CCMO has had a leadership change; Jose Gomez is the interim supervisor.
 - ii. MET has moved to 24/7 coverage; this change is very positive among law enforcement. iPads have been deployed in emergency rooms; this means that virtual MET is available to all local emergency departments.
 - iii. Hotline is working with lifeline on new safety assessment model and satisfaction survey.
 - iv. Closely working with schools to determine programs are going to be implemented; considering how different school will be this year.
14. **Recovery Support Admin.** – Jon Casida/Diana Najera
 - i. Receiving referrals for groups and have excellent attendance for virtual groups.
 - ii. The coordinated entry system started in May for Green Gardens. If there is any interest, please contact Shannon Tolar. This has been very beneficial.
15. **Consumer Family Learning Center** – Yolanda Rosas
 - i. There has been a good outcome with the virtual groups; they are working with clients on overcoming issues with connecting.
 - ii. Developed two Covid impact groups; these are offered in Spanish and English; to discuss what is going on with Covid19 nationwide.
 - iii. Slowly CFLC is opening onsite groups; these are only by invite.
16. **Provider Updates**
 - i. There is no new information to report on at this time.
17. **Quality Improvement Committee** – There were no recommendations at this time.
18. **Unfinished Business** – There was no unfinished business to be reported on.
19. **Adjourn** – Next scheduled meeting August 24th, 2020 at 4:00 – 5:00 PM, will be virtual via Teams.

This meeting is MH UR Code 3





BEHAVIORAL
HEALTH & RECOVERY
SERVICES

**UPDATES FROM PRIVACY AND
CORPORATE COMPLIANCE**



WHAT'S NEW

- KernBHRS Memo issued on July 14, 2020 outlines changes to several processes relating to consent:
 - a) [Informed Consent/Authorization](#)
 - b) [Obtaining Signatures and Completing Required Forms](#)
- Feedback on flexibility, challenges, opportunities for improvement



WHAT'S NEW

- Email Encryption Changes Effective July 23, 2020
- Quick Guide will be available soon on SharePoint!



WHAT'S NEW

- Policy 10.1.10 Updates
 - Expanded background information to define who can be the “Personal Representative” after client death
 - Background information was added to clarify substance use disclosures to the Coroner
 - Detailed policy instruction was added on what documentation can be accepted to designate an individual as a personal representative for both adults and minors
 - Specific instruction was added on disclosures to the coroner, including mental health and substance use specific language that must be included with disclosures to the coroner
 - Attachment A was added, which is a Parental Declaration for deceased minor clients who had no court involvement during treatment



DATA POINTS

- Sequestered Records:
 - 36 reviewed
- Break the Glass:
 - 78 uses of the function
- Privacy Incidents:
 - one



MEMORANDUM

TO: KernBHRS MH Employees **DATE:** July 14, 2020
FROM: Karina Leonzo-Castillo, BH Supervisor II Documentation Compliance
Lesleigh Davis Administrator, QID

SUBJECT: Instructions for Obtaining Signatures and Completing Required Forms During COVID-19 Crisis

This memo is to inform you that some Cerner forms can be final approved without the client's signature as long as there is a verbal consent from the client documented in the client's chart.

Due to the COVID-19 pandemic, processes were established to assist staff with providing Informed Consent and obtaining Client Authorization when providing telephone or telehealth services. We initially asked that all forms (Consent to Treatment, Notice of Privacy Practices, Treatment Plan, etc.) completed via telehealth or telephone were not final approved. Staff were instructed to obtain signatures at the next face to face meeting.

Signatures may now be obtained at the first annual review that occurs post COVID-19 pandemic. Please see the list below for guidance on when a signature is required or when verbal consent is appropriate. There are still some documents (*Releases of Information*) that require a client's signature even during this pandemic.

Forms that were not final approved, but contain COVID signature statement, may now be Final Approved.

To Approve all Forms Pending Physical Signatures

- ✓ Team Supervisors must run *Forms Left in Draft* report to identify any forms pending signatures
- ✓ Verify that a verbal consent was received by client at time of completion
- ✓ Final approved the form if verbal consent only is appropriate during pandemic
- ✓ If the form requires a signature, create a plan for obtaining signature at the next face to face service.





SIGNATURES ON FORMS DURING AND AFTER COVID-19

Form	Current for MH Practice During COVID	MH-Practice After COVID	Current for SUD Practice During COVID	SUD-Practice After COVID
Consent for Treatment	Verbal agreement okay	At the 1-year mark, create new form and obtain signature	Need signature	Need signature
Notice of Privacy Practices	Verbal agreement okay	At the 1-year mark, create new form and obtain signature	Verbal agreement okay	At the 1-year mark create new form and obtain signature
Treatment Plan	Verbal agreement okay	At the 1-year mark, create new TP and obtain the signature	Verbal agreement okay	At the 90-day mark, create new TP and obtain new signature
Request for records	Need signature	Need signature	Need signature	Need signature
Releases of Information for Non-Treating Provider	Need Signature for non-treating provider.	Need signature	Need signature	Need signature
Releases of Information for Treating Providers	Verbal agreement okay (only MH information)	Verbal agreement okay (only MH information)	Need signature	Need signature
Request for Information	Need signature	Need signature	Need signature	Need signature
Revocation to Release Information	Need signature	Need signature	Need signature	Need signature
Assignment of Benefits	Verbal Agreement okay	At the 1-year mark, create new form and obtain signature	N/A	N/A
UMDAP	Verbal Agreement okay	At the 1-year mark, create new form and obtain signature	Verbal Agreement okay	At the 1-year mark, create new form and obtain signature
Medication Consents	Verbal Agreement okay	At the 2-year mark, create new form and obtain signature	Need signature	Need Signature
Telehealth Consent for Treatment	Verbal Agreement okay	At the 1-year mark, create new form and obtain signature	Verbal okay	N/A

When receiving verbal consent: *“Due to nationwide COVID-19 precautions, this assessment was conducted over the phone. Client was asked, ‘Do you provide your verbal consent for treatment from Kern Behavioral Health and Recovery Services (or provider name)?’ The client stated, ‘yes’. Additional verbal consent was obtained for (list additional forms, e.g. Notice of Privacy Practices, UMDAP, Assignment of Benefits, Orientation Checklist, Treatment Plan).”*

QID Documentation Compliance Team: Hotline Number 868-6740 Option #5

Form created 7/14/2020

