



Bill Walker, LMFT, Director

Kern County Behavioral Health Board
System Quality Improvement Committee

Monday, November 23, 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	BHB-Co-Chairperson
X Alexander Lopez	KernBHRS-Gateway	X Lesleigh Davis	KernBHRS-QID Administrator
X Chelcy Gibbons	KernBHRS-Department Supports	X Maria D Najera	KernBHRS-Residency Clinic
X Courtney Isaac	KernBHRS-Patient Rights	X Marisa Garcia Trebizo	CSV-QI-Director
X Cynthia Jackson	KernBHRS-QID Support	X Melanie Olcott	KernBHRS-QID SUD
X Eryka Campos	KernBHRS-CMR/QID Support	X Richard Hoffer	BHB Member
X Heather Williams	KernBHRS-Quality Monitoring	X Shannon Tolar	KernBHRS-RSA
X John French	KernBHRS-SUD	X Tammy Cates	KernBHRS-RSA & SET
X Jon Casida	KernBHRS-RSA CAC/SET	X Tara Christian	KernBHRS-KLD ATT
X Karina Leonzo-Castillo	KernBHRS-Doc. Compliance		

1. **Welcome and Introductions** – Lesleigh Davis welcomed the attendees and conducted introductions.
2. **Review and approval of October 2020 Minutes** – Tammy Cates motioned to accept, and Tara Christian seconded.
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 – Notice of Adverse Benefit Determination (NOABD)**
 - a. Heather Williams – Mental Health
 - i. An NOABD is a written notification to Medi-Cal beneficiaries with specific required information on beneficiary rights under the Medi-Cal program and the Fair Hearing and Appeals process. Department of Health Care Services issued required templates for each NOABD issued. Each NOABD includes an attachment that outlines client’s rights. QID Has developed a required training for all MH clinicians to attend during the weeks of November 30th through December 18th. Ongoing training will be made available within Relias
 - b. Melanie Olcott – Substance Use Division
 - i. NOABDs were a big change for SUD that went into effect in 2018. For SUD clients this change resulted in clients being informed in writing for certain changes. Trainings have been provided to SUD Providers for this new benefit. An online “app” was created and went live January 1st, 2020, this app helped to streamline the process and to gather data needed.
6. **Guest Presenter – Unusual Occurrence Reports (UOR)**
 - a. Karina Leonzo-Castillo – Mental Health
 - i. Whenever there is an egregious event at any of our sites, the staff is supposed to enter the information on the app. UORs are not negative, but good way to see how situations are handled. Reports are reviewed and approved by supervisor, agency administrator and KernBHRS Admin. QID reads all UORs to ensure the incidents are addressed appropriately and identify areas of improvement for all MH Clients. Currently training that could help with this is being developed. In the 1st quarter of FY 20-21 there were 297 total UORs submitted and 273 of these were addressed appropriately.
 - b. Melanie Olcott – Substance Use Division
 - i. There is a much smaller amount reported in SUD than MH since it is only the one division. If an event can potentially cause harm to a client or visitor, whether that harm is psychological or physical, it requires a report. In the 1st quarter of FY 20-21 there were 18 UORs submitted.
7. **Quality Improvement Division – Lesleigh Davis**
 - a. In February there will be a review of our compliance with regulations under the Substance Abuse Block grant and Drug Medi-Cal Organized Delivery System waiver. As we progress with this there will be more information to follow at coming meetings.
 - b. The Data Notebook is a document that is essentially a survey issued by the BHB Planning council. They collect information from 56 counties to use for advocacy at the state level. A meeting was held in November by QID to gather information and discuss how to proceed with the best answers to the survey questions. Lesleigh will be presenting the approved data notebook at the following BHB meeting.



8. **Department Supports Admin. Ethnic Services Manager** – Chelcy Gibbons
 - a. A sub-committee has been developed to internally review cultural competency training. Members are needed.
 - b. CBDHA and DHS are working together to create a template for the CC Annual Plan, there will be more updates to follow.
 - c. The next CCRC meeting is scheduled for December 18th, 2020 at 9:30 -10:30 AM.
9. **Substance Use Division** – Alexander Lopez
 - a. The key people have been trained for the Mini Assessment Center (MAC). This helps improve the SUD process because we can route clients to an immediate assessment.
10. **Adult System of Care** – John French
 - a. The Specialty Services Team EMDR second cohort has completed training and is taking on clients.
 - b. DBT has a new therapist that has started with the team.
 - c. There are ongoing efforts with the Adult System of Care re-design, developing first time service discharge narratives, and also continuing to work towards access points.
11. **Children’s System of Care**
 - a. No one was available to give an update.
12. **Kern Linkage Division** – Tara Christian
 - a. No updates were provided at this time.
13. **Crisis Services**
 - a. No one was available to give an update.
14. **Medical Services** – Maria Najera
 - a. Currently trying to get the virtual seeking safety cohorts up and running.
 - b. Submitted a couple EMDR Referrals, this was an easy process.
15. **Recovery Support Admin.** – Tammy Cates
 - a. Preparing and getting coverage for the holidays.
 - b. We have been working closely with KLD trying to get clients off of the streets.
16. **Consumer Family Learning Center** – Jon Casida
 - a. Virtual classes are being offered on an ongoing basis.
17. **Provider Updates**
 - a. Clinica Sierra Vista – Marisa Garcia Trebizo – No updates at this time.
18. **Quality Improvement Committee** – There were no recommendations at this time.
19. **Unfinished Business** – There was no unfinished business to be reported on.
20. **Adjourn** – Next scheduled meeting January 25th, 2021 at 4:00 – 5:00 PM, will be virtual via Teams. The December meeting will be dark due to the holidays.

This meeting is MH UR Code 3



BEHAVIORAL
HEALTH & RECOVERY
SERVICES

**NOTICE OF ADVERSE BENEFIT
DETERMINATION:
NOABD ISSUANCE**



What are NOABDs?

Written notifications to Medi-Cal beneficiaries with specific required information on:

- Beneficiary rights under the Medi-Cal Program
- The fair hearings and the appeals process

Department of Health Care Services (DHCS) issued required templates for each NOABD issued



Why are NOABDs Issued?

Whenever a determination has been made regarding the following:

- Eligibility decision
- Effective date of coverage
- Any changes made to eligibility status or level of benefits
- Medical necessity
- Appropriateness and setting of covered benefits
- Financial liability



Notification on Client's Rights

Each NOABD includes "NOABD Your Rights" attachment that outlines the client's rights, for example:

- Client's right to request internal appeal within 60 calendar days
- Client's right to request State hearing after filing an appeal or if the MHP fails to send a timely resolution



NOABD Training

In order to increase appropriate issuance of NOABDs, QID has developed a required training for all Mental Health clinicians to attend during the weeks of November 30th through December 18th

On going training will be made available within Relias.



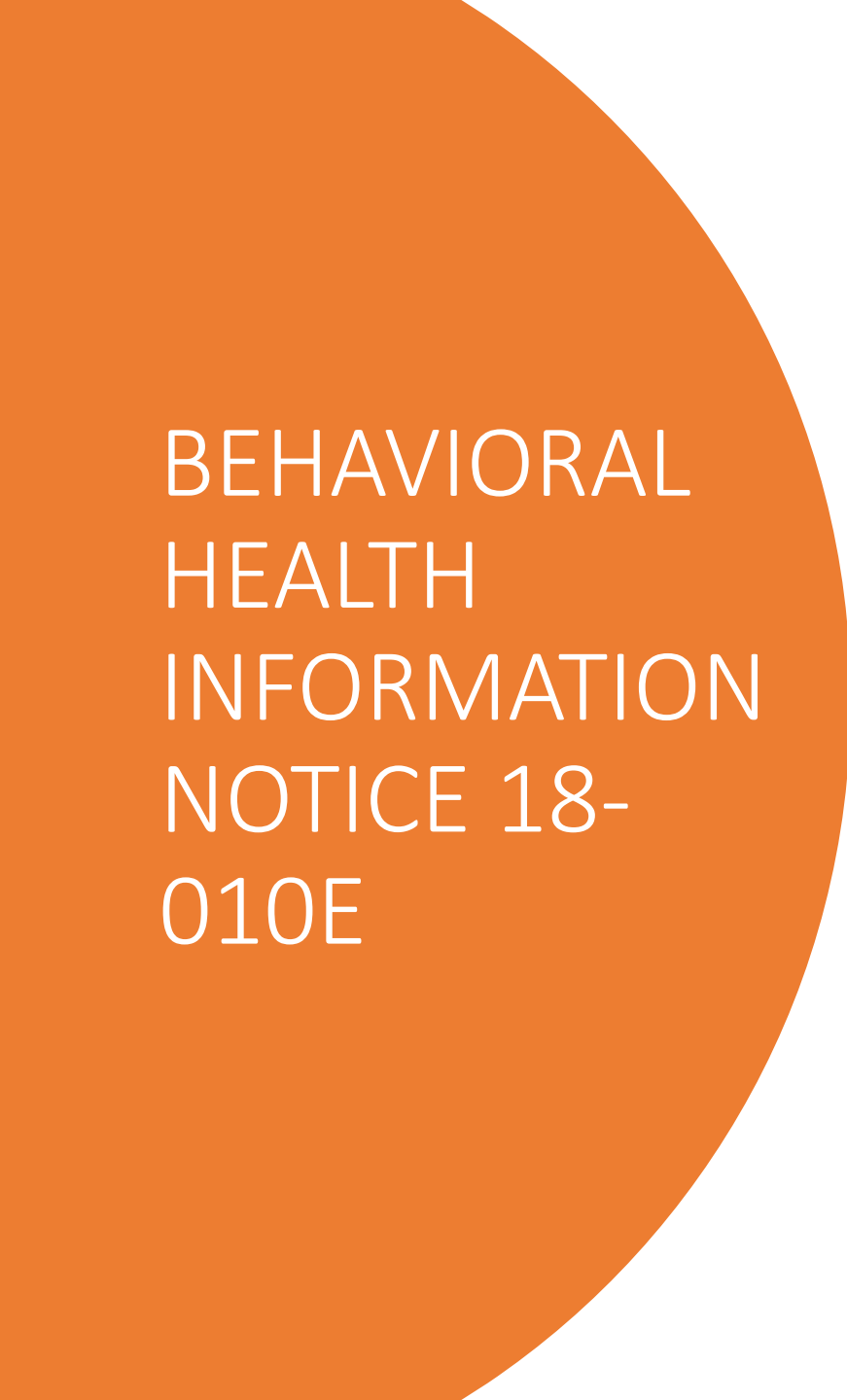
NOABD Questions

Any questions regarding NOABDs please contact the Quality Monitoring Team via email: QualityMonitoring@kernbhhrs.org

Or Heather Williams at hwilliams@kernbhhrs.org or via cell (661) 428-9716


NOTICE OF ADVERSE BENEFIT DETERMINATION

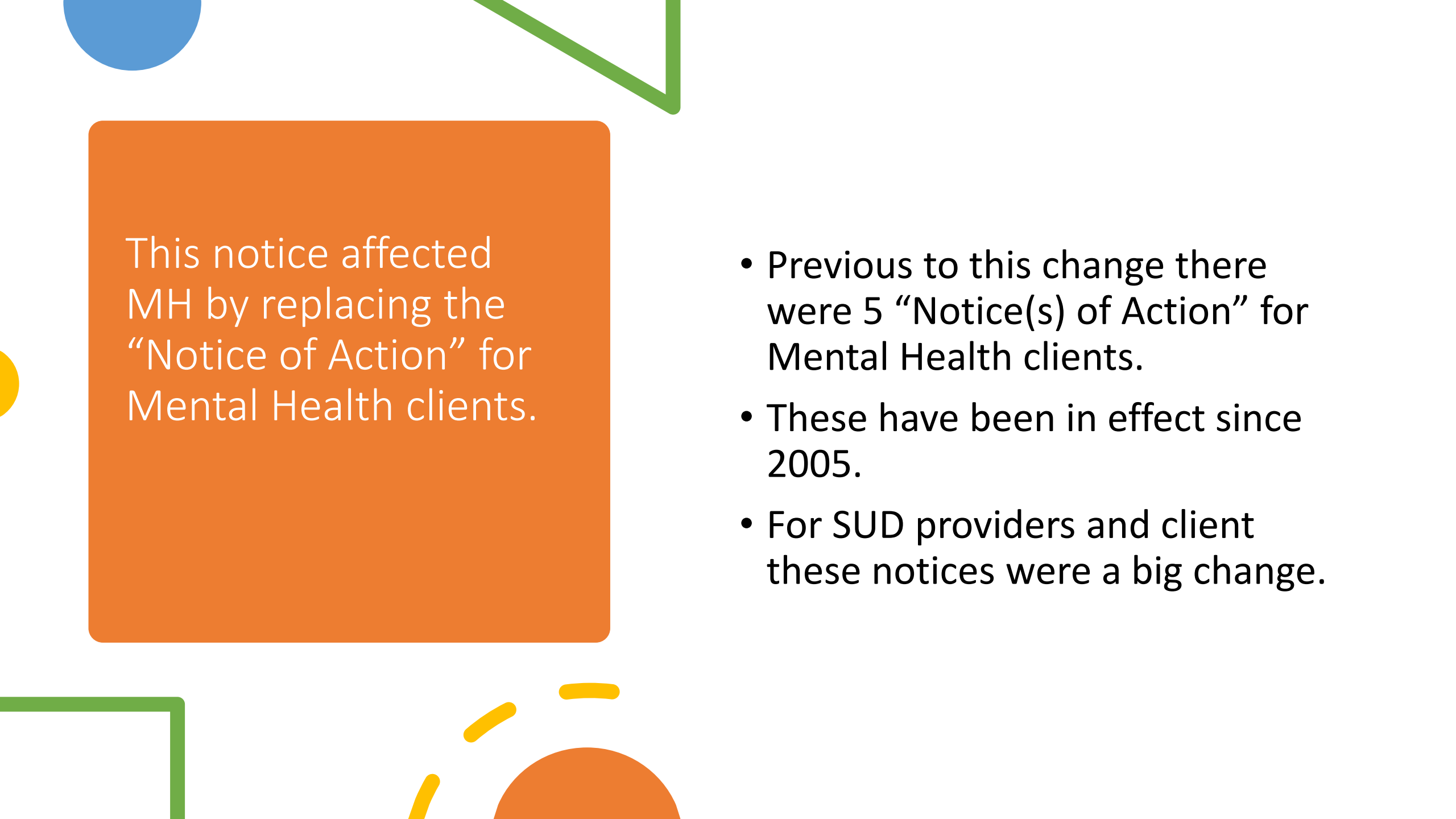
NOABD'S FOR SUBSTANCE USE DISORDER CLIENTS



BEHAVIORAL
HEALTH
INFORMATION
NOTICE 18-
010E

In 2018 clients seeking and receiving services for substance use treatment were provided this entitlement to receive notices about decisions made in their care.





This notice affected MH by replacing the “Notice of Action” for Mental Health clients.

- Previous to this change there were 5 “Notice(s) of Action” for Mental Health clients.
- These have been in effect since 2005.
- For SUD providers and client these notices were a big change.



Why the changes?

- The Department of Healthcare Services developed new notices to inform Medi-Cal clients of their rights and expanded to include Substance Use Disorder clients.
- The changes also stipulated new requirements for handling Grievances and Appeals.

For SUD clients this change resulted in clients being informed in writing if:



After assessment, they are not eligible for a service

Are about to be terminated for a service they are approved for

If a service they were approved for is modified


If an approved service is not provided in a timely manner

Who to contact to help them with any complaints about their treatment service

- 
- Templates for what each notice should look like were provided by the Department of Healthcare Services, including information in multiple languages.
- 


- Staff would need to know who to send the notices to, what type of notice and for what situation specific to each client's treatment.
- We provided trainings to SUD providers for this new benefit.
- An online “app” was created and went live January 1, 2020.





The app helped to streamline this process of writing and sending a Notice to a client.

The app helps gather data needed to ensure our clients are receiving notices they are entitled to.



WHAT'S
NEW
NOW??

- From the information analyzed we tailor program-specific trainings for employees serving our clients.
- These trainings help us to improve providers ability to communicate in writing determinations affecting client's care.



THANK YOU!!

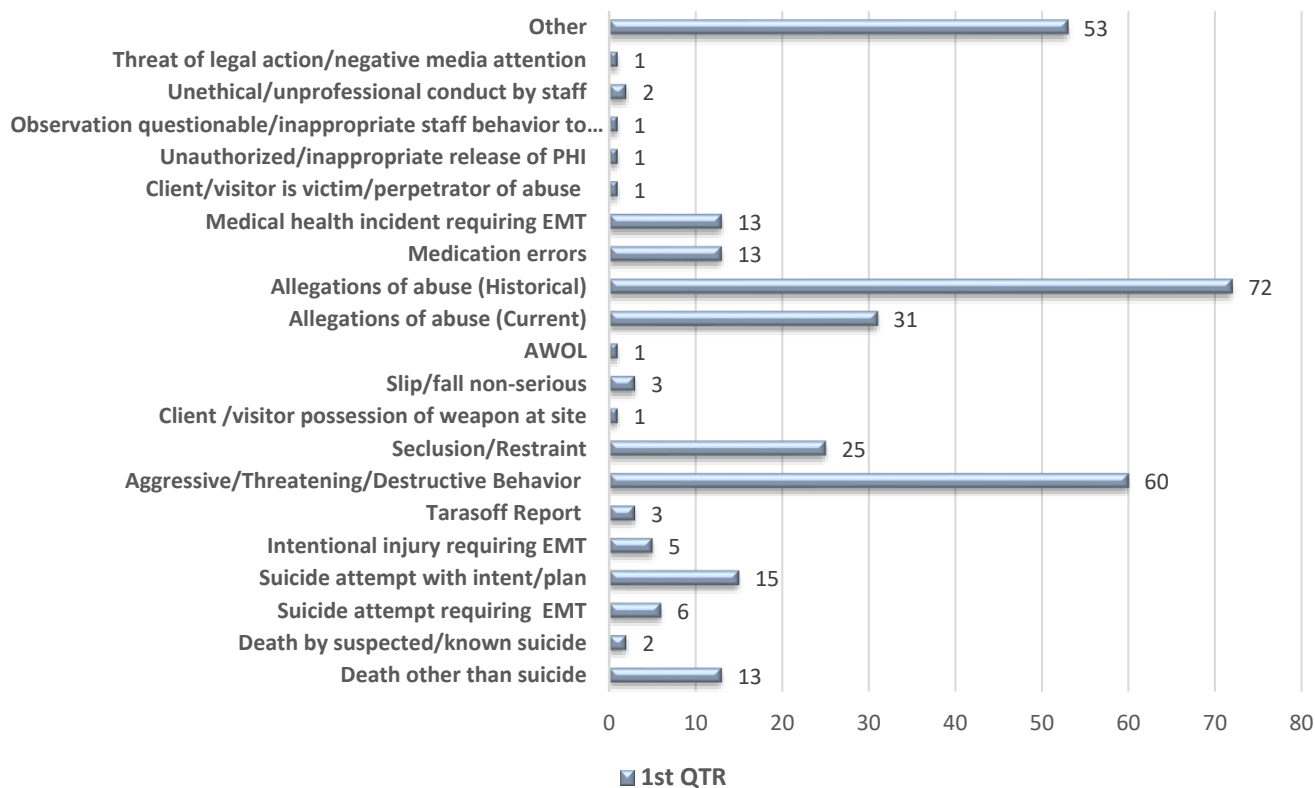
Any questions?

Unusual Occurrence Reports

- App to enter all reports
- Reports are reviewed and approved by supervisor, agency administrator and KBHRS Administrator
- QID reads all UORs submitted to ensure the incidents were addressed appropriately and identify areas of improvement for all MH clients

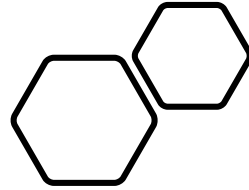
UOR's FY 20-21					
QTR	KernBHRS	Contract Providers	Total Submitted	Total # Addressed Appropriately	GOAL 100%
1 QTR.	196	101	297	273	92%

UOR Types Received By All MH Teams FY 19-20 (322)



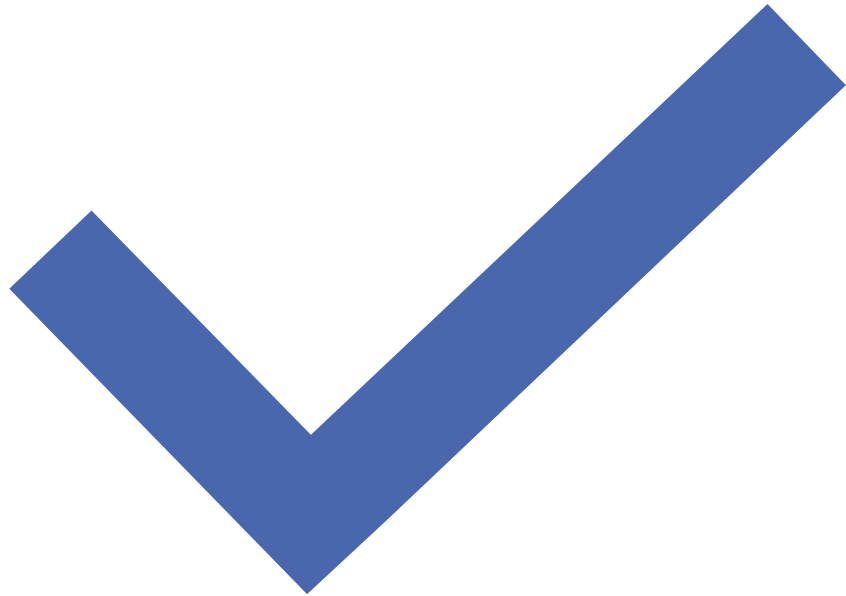
Areas of Improvement:

- Letters of Recommendations are sent when we see something that could have been handled differently.
- We will be talking to our training department to explore possible trainings to help reduce certain types of incidents.
- Question to this group: **What do you think can be done in some of your teams/agencies to help with the incidents you see?**
- Ideas? Contact Karina 661-805-2929 or email at kleonzo@kernbhhs.org



UNUSUAL OCCURRENCE REPORTING

In the Substance Use Division



- Unusual Occurrence Reports are confidential and considered privileged information.
- Reports are situations that occur at SUD provider sites, or in the field.
- If an event can potentially cause any harm to visitor or clients whether that harm is psychological or physical, it requires a report.

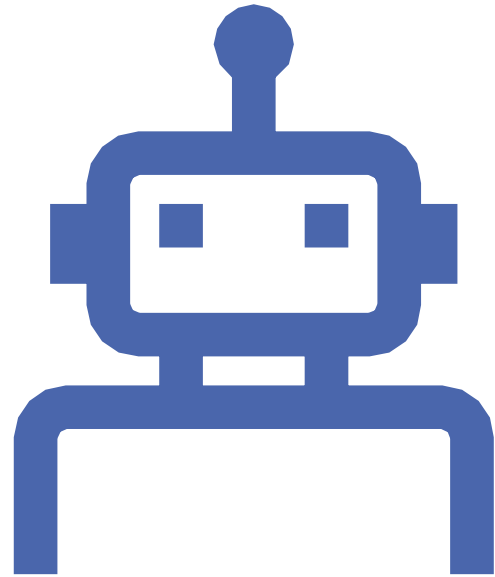


OTHER REASONS FOR REPORTING

- Unauthorized release or Protected Information, Protected Health Information.
- Injuries, or serious threats of harm
- Suicide attempts, Death
- Violation of suspected violation of professional licensure and/or ethics
- Allegations of abuse or neglect

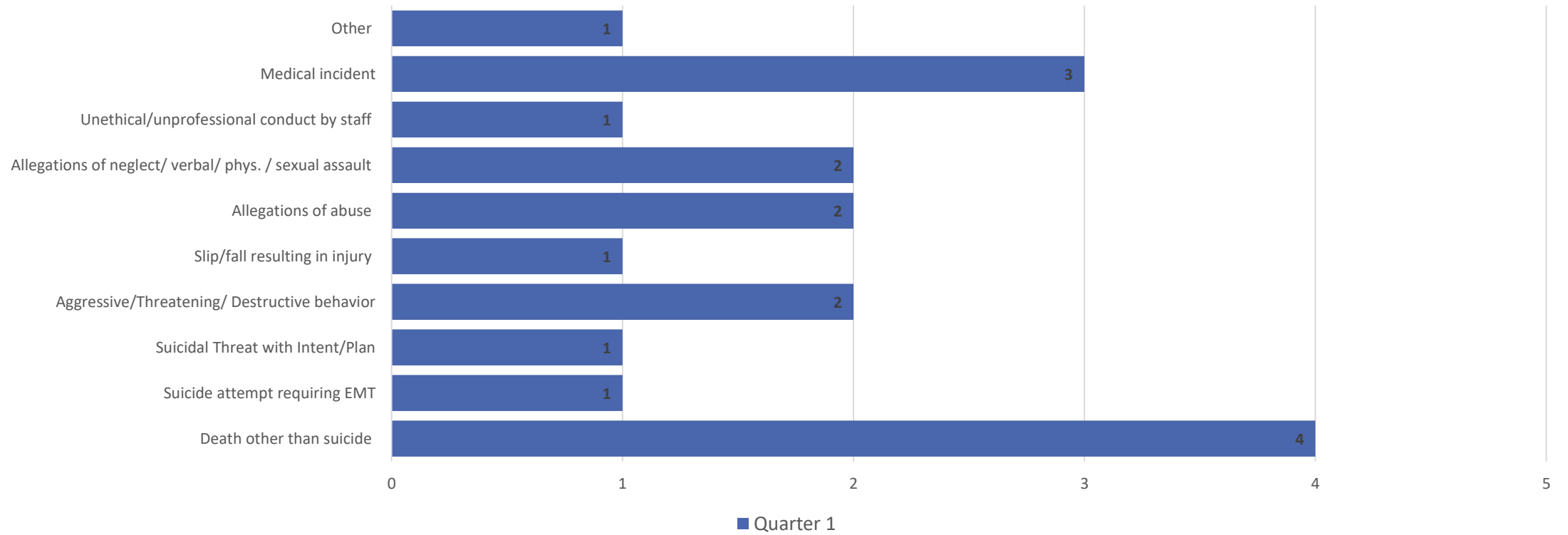
KernBHRS has developed an “app” to track trends in specific events.

- Submitting Unusual Occurrence Reports through the app also allows for notification of other Departments and committees in KernBHRS, such as:
- The Morbidity & Mortality Committee;
- Privacy & Compliance;
- Patient’s Rights



What are we seeing in SUD?

FY 20-21
UORs by Type



WHAT ARE THE BENEFITS OF SUD UNUSUAL OCCURRENCE REPORTING?

- This process maintains timely reporting, review, and resolution of unusual occurrences.
- The submission of the report notifies Supervisors, Administration for contracted SUD Providers, and the SUD Administrator for KernBHRS.
- With awareness of any trends, our Administration is able to quickly develop a plan of action or corrective action when needed, improve the safety of work environments, and improve the quality of services provided to SUD clients.

