

San Luis Obispo County Mental Health Quality Support Team  
Work Plan, Fiscal Year 2019-2020

**QST Work Plan:**

The annual QST Work Plan identifies key areas that were a focus of the MHP’s quality improvement efforts for the year. The QST Work Plan draws upon the Department of Health Care Services (DHCS) Quality Strategy Report (6/29/2018) and DHCS Managed Care Rule Informational Notices to determine priorities. The Work Plan Evaluation will detail the results of our improvement efforts.

**Goal # 1: Maintain a responsive toll free 24/7 Central Access Line**

**Measurable Objectives:**

- All calls will be logged as required (100% success rate)
- Staff who answer phones will utilize the scripted responses

Planned Steps:	Results:
Refine and continue to test the effectiveness of scripted responses	
Track disposition details: number of referrals to MH and SUD services	
Conduct at least two test calls per month (English and Spanish) to evaluate performance in key areas identified in the contract with Department of Health Care Services (DHCS)	
Conduct training for Managed Care and TMHA SLO Hotline staff, particularly in documentation of requests	
Complete quarterly reporting of Central Access line performance to DHCS	

**Goal # 2: Monitor service delivery capacity**

**Measurable Objective:**

Maintain a network of providers (staff plus contractors) sufficient to provide the full array of SMHS to all areas of SLO County

Planned Steps:	Results:
Measure service delivery regionally for adults and youth	
Track utilization of Therapeutic Behavioral Services (TBS) and In-Home Behavioral Services (IHBS) for youth clients who have SLO County Medi-Cal	
Track requests for service by beneficiary zip code; analyze for gaps and trends	
Track utilization of services (# of services and cost per beneficiary)	
Complete quarterly Network Adequacy Certification Tool (NACT)	

**Goal # 3: Provide timely access to services**

**Measurable Objective:**

Track and maintain access to services to meet the timely access standards

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Planned Steps:	Result: See
Monitor and report wait time for assessment from call to offered assessment	
Monitor and track timeliness of follow up and ongoing care appointments	
Monitor and report wait time for psychiatric assessment	
Monitor and report wait time for post hospital follow up	
Track wait time from acceptance of referral to initial appointment with Network Provider (NWP)	

**Goal # 4: Increase capacity to serve Latino beneficiaries**

**Measurable Objective:**

Increase penetration rate for Latino beneficiaries to 7% (SLO calculation)

Planned Steps:	Result:
Measure Penetration Rate (PR) annually	
Maintain bilingual staff capacity at all key points of contact	
Engage with Promotores and Cultural Competence Committee	

**Goal # 5: Maximize consumer satisfaction**

**Measurable Objective:**

Ensure consumer satisfaction as evidenced by responses to the Performance Outcome Quality Improvement (POQI) survey. Satisfaction questions will be rated "Strongly Agree" or "Agree" by at least 85% of respondents.

Planned Steps:	Results:
Encourage a representative sample of beneficiaries to complete the POQI survey	
Recommend improvement activities if result falls below the standard	
Report promptly to staff at all sites	

**Goal # 6: Monitor and respond to beneficiary requests**

**Measurable Objective:**

Successfully resolve all beneficiary concerns at the lowest possible level within the required timelines.

Planned Steps:	Results:
Track all consumer requests and report quarterly	
Complete annual DHCS reporting in a timely manner	

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**Goal # 7: Monitor and respond to provider requests and appeals**

**Measurable Objectives:**

Successfully resolve all provider appeals at the lowest possible level within the required timelines.

Resolve Treatment Authorization Requests (TARs) for out-of-county inpatient hospitalization within 14 days of receipt (100% compliance).

Planned Steps:	Results:
Track all provider appeals	
Monitor and report outcome and timeliness of resolution	
Track and report the number and percentage of TARs completed within 14 days	

**Goal # 8: Implement interventions when better care was more appropriate**

**Measurable Objective:**

Review and respond to Incident Reports within one month of report submission.

Planned Steps:	Result:
Review Incident Reports; monitor and report. Make recommendations regarding follow-up when better care was more appropriate	
Refer Incident Report to Morbidity & Mortality Committee in event of death or serious injury	

**Goal # 9: Improve clinical documentation**

**Measurable Objective:**

- All MHP staff will attend documentation training annually
- Establish Practice Guidelines for Youth Mental Health Assessment

Planned Steps:	Results:
Revise and distribute Documentation Guideline update	
Create a comprehensive documentation training module for eLearning	
Establish training schedule to include all MHP and contractor sites	
Establish and train staff to use a standard set of assessment practice guidelines	

**Goal # 10: Conduct effective clinical records reviews**

**Objectives:**

Establish and implement a monthly audit schedule as part of Utilization Management Program.

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Identify areas of strength and deficiency in documentation for each monthly audit to help guide training and to ensure appropriate billing for services.

Planned Steps:	Results:
Implement a monthly audit schedule to include all MHP and contractor sites	
Conduct comprehensive audits (10% of all open cases) quarterly	
Examine utilization trends and consistency in authorization decisions	
Conduct more targeted review of cases as documentation concerns or other issues emerge; conduct targeted training	

**Goal # 11: Improve and Update Policies & Procedures**

**Measurable Objective:**

Review and reformat MHP not revised within the past two years

Planned Steps:	Results:
Conduct a comprehensive review and update/approve all policies	
Incorporate new Federal Managed Care regulations into policy	
Migrate policies to a secure Intranet location	

**Goal # 12: Develop improved Site Certification procedures**

**Measurable Objective:**

Create a standardized set of tools and procedures for certification and tracking of all county operated and contract provider sites.

Planned Steps:	Results:
Develop a monitoring process that ensures that each site certification remains current	
Ensure that the new State tracking system remains current	
Develop a program approval process for Short Term Residential Treatment Programs (STRTPs)	

**Goal # 13: Create a 'Data Dashboard' to make performance data accessible and meaningful**

**Measurable Objective:**

Create an easy-to-use dashboard to display key performance indicators

Planned Steps:	Results:

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Develop a reporting mechanism for evaluating Children’s Assessment of Needs and Strengths (CANS) and Adult Needs and Strengths Assessment (ANSA) rating scores by client, site and program	
Develop a Data Dashboard for presenting the material in an accessible manner	
Recommend system and process changes based on performance data	

**Goal # 14: Monitor the safety and efficacy of medication practices**

**Measurable Objective:**

Create a standardized set of tools and practice guidelines for prescribers

Monitor prescribing practices during regular peer review

Planned Steps:	Results:
Medical peer review (monthly)	
Publication of prescriber practice guidelines/tools	
Track implementation of laboratory study procedure and compliance	