



FY 2023-2024

QUALITY IMPROVEMENT COMMITTEE

Solano County Behavioral Health
August 8, 2024
1:30pm – 3:30pm

Quarter 4 1

ANNOUNCEMENTS

- ❖ **For next FY, we want to work towards increased participation and interaction in QIC**
 - **There will be an email going out with more details regarding plans for hybrid meetings and program attendance**
 - **Programs will be asked to present on QIC-related activities throughout the fiscal year**
- ❖ **BH-CONNECT is a statewide incentive program that is a large-scale initiative to provide incentives to County BHP's to improve specific aspects of the community BH infrastructure**
 - **Solano is working on a readiness assessment that is due at the end of September, so please be on alert if you receive any requests for information**
 - **Please see the August QA IN for more details**
- ❖ **Heads up that our DHCS triennial audit should be occurring later this year**



QUALITY ASSESSMENT & PERFORMANCE IMPROVEMENT PLAN

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- I. Cultural Diversity & Equity
- II. Wellness & Recovery
- III. Beneficiary Satisfaction & Protection
- IV. Beneficiary Outcomes & System Utilization
- V. Service Timeliness & Access
- VI. Performance Improvement Projects
- VII. Program Integrity
- VIII. Quality Improvement



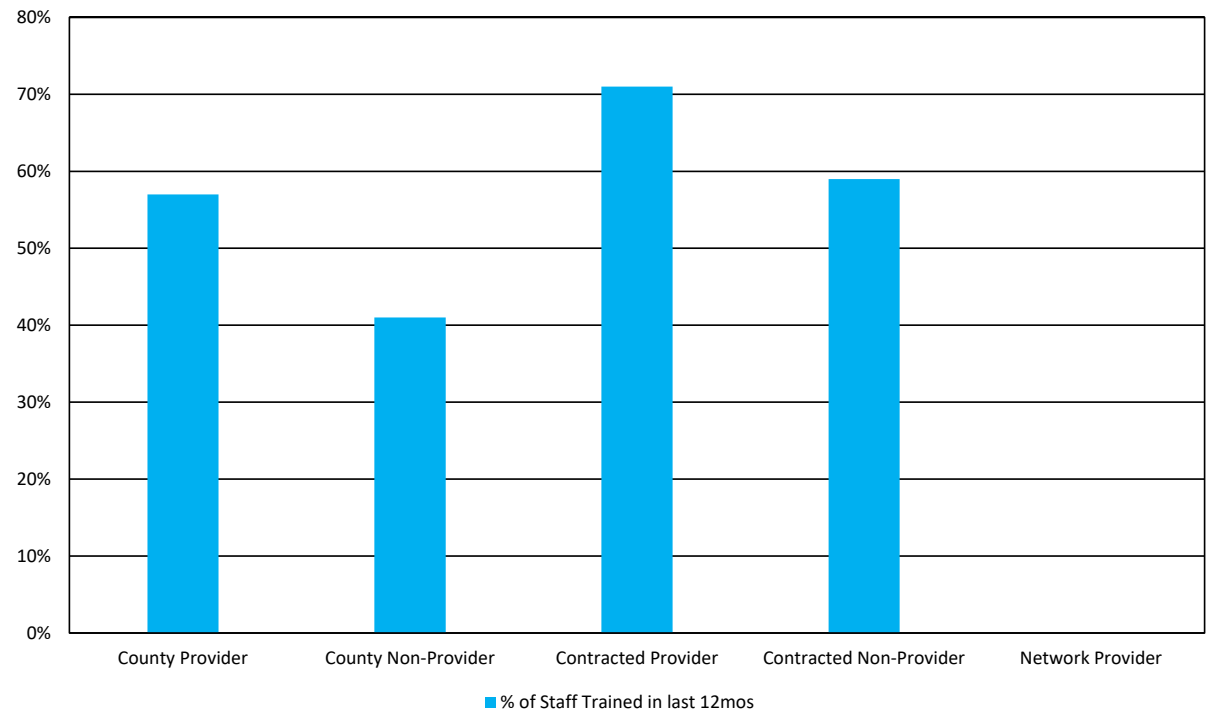
I. CULTURAL DIVERSITY & EQUITY

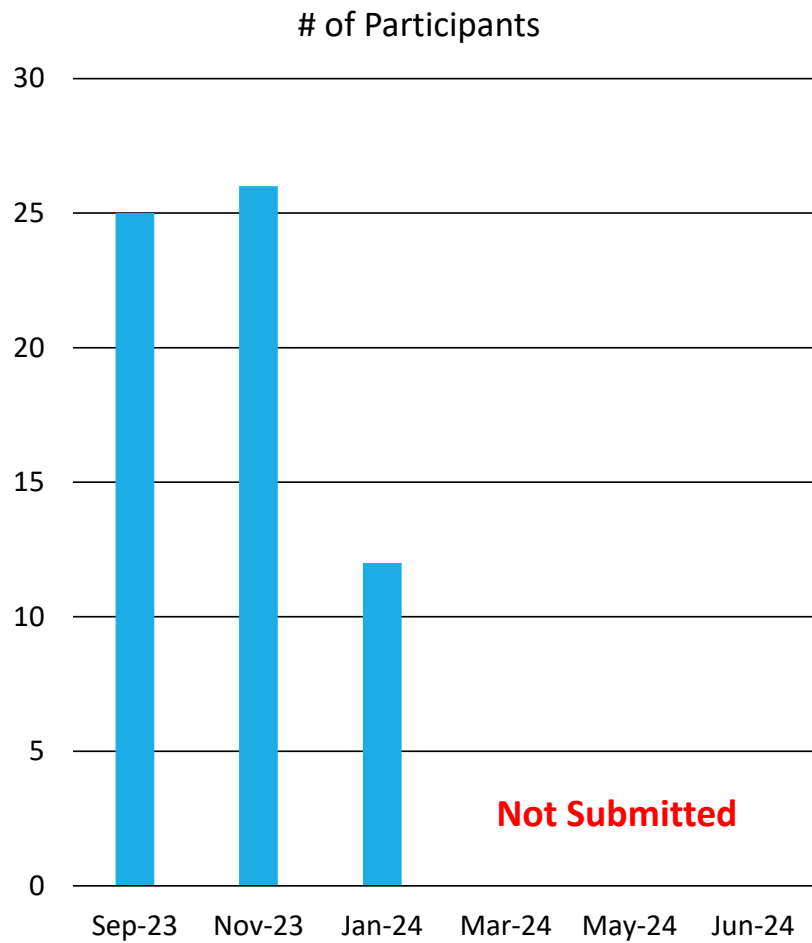
I. CULTURAL DIVERSITY & EQUITY

AG-1: System wide Cultural Competence Training

Goal: Monitor annual training and work toward 100% training compliance for providers and non-providers.

System-Wide Diversity & Equity Training





FY 2023-2024

I. CULTURAL DIVERSITY & EQUITY

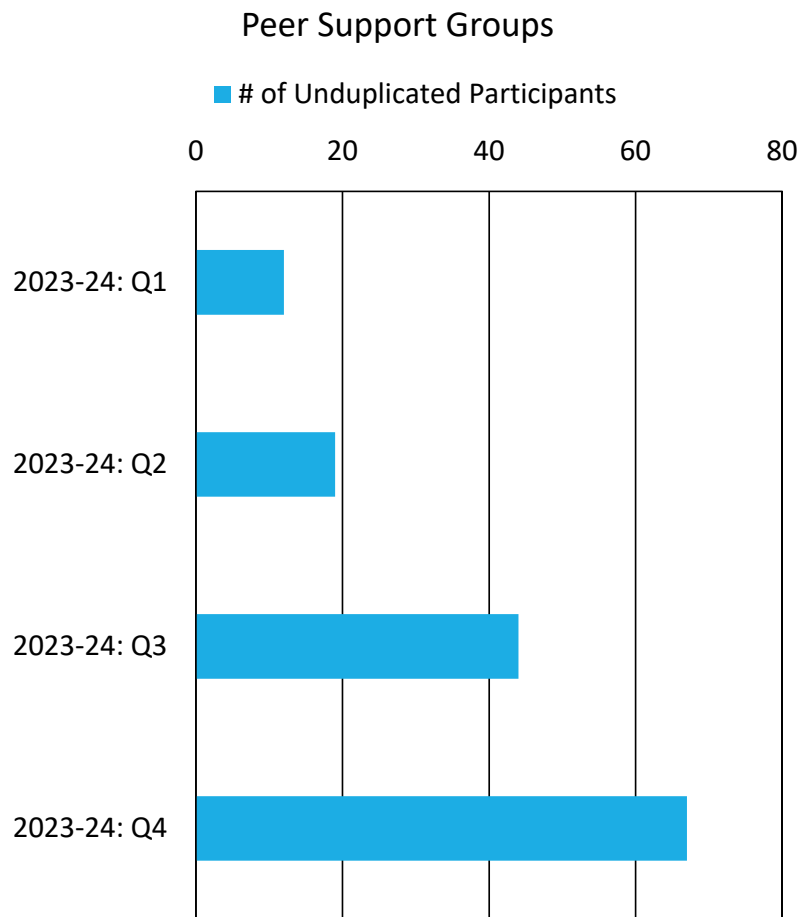
Diversity & Equity Committee Updates:

Additional SCBH Diversity & Equity Efforts:



II. WELLNESS & RECOVERY

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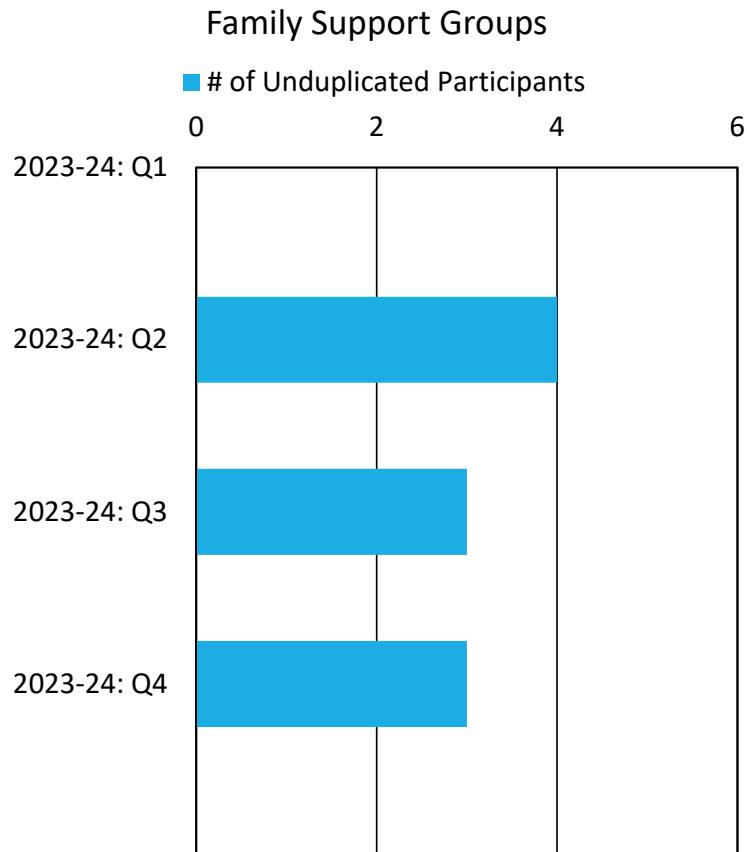


FY 2023-2024

AG-1: Provide Support Groups to Adult and Family community members to better support their understanding of their or their loved one's BH challenges and learn effective ways to cope and seek support.

Goal:

- Increase the # of total unique group members who participate quarterly.
- Increase the % of unduplicated participants who respond positively to the quarterly "Quality of Life Outcome Tool" survey items.



FY 2023-2024

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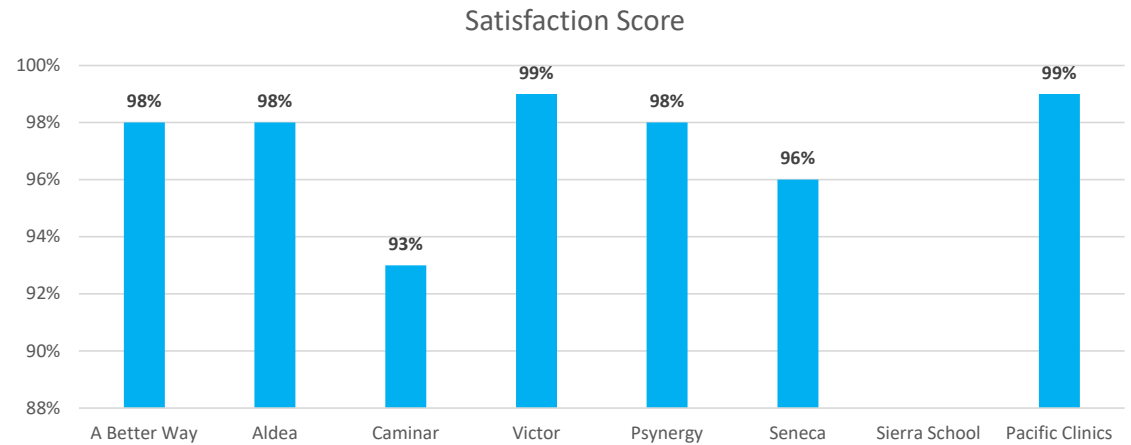
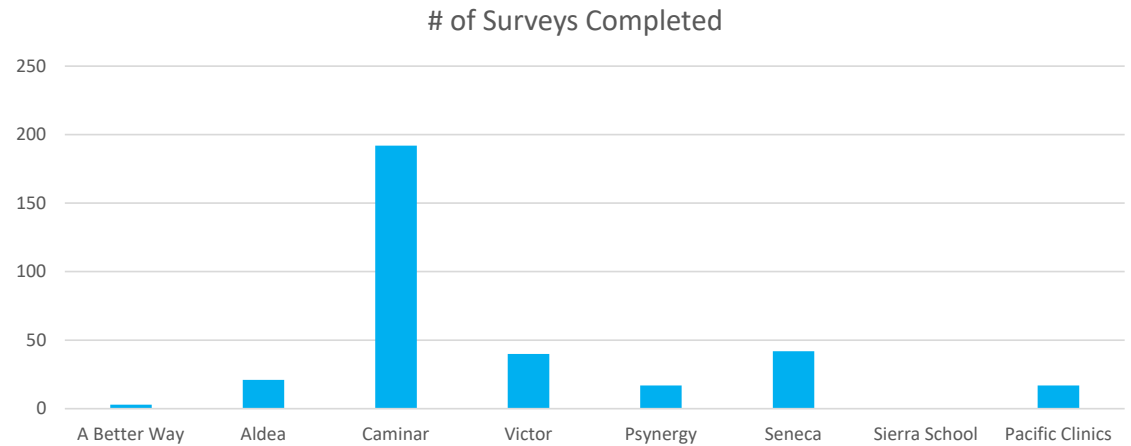


III. BENEFICIARY SATISFACTION & PROTECTION

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AG-1: Solano MHP will review survey data from our semiannual Solano MHP Service Verification/Consumer survey to begin to look at survey results per program. Each program will be challenged to set a program specific goal for improvement targeting baseline data from Consumer survey. Post intervention measurement will be compared with baseline data.

Goal: Solano MHP County & Contracted programs will each identify an area of Consumer Satisfaction to improve, develop an intervention & goal to address the area of improvement, & demonstrate improvement from baseline to post-intervention measure.



III. Beneficiary Satisfaction & Protection

Service Verification Client Satisfaction Survey Question	Yes, definitely	Yes, somewhat	No	Not Answered
1. Did the staff explain things in a way that was easy to understand?	93%	5%	1%	--
2. Did the staff listen carefully to you?	95%	4%	1%	--
3. Did the staff show respect for what you had to say?	95%	4%	0%	--
4. Did you feel the staff was respectful of your race/ethnicity?	96%	2%	0%	1%
5. Did you feel the staff was respectful of your religion/spirituality?	95%	3%	0%	1%
6. Did you feel the staff was respectful of your sexual orientation/gender identity?	95%	2%	1%	1%
	Yes	No, but I'd like one	I don't need one	Not Answered
7. Was an interpreter/bilingual staff provided?	11%	2%	83%	4%
If yes,	Yes, definitely	Yes, somewhat	No	Not Answered
8. Did the interpreter/bilingual staff meet your needs?	11%	1%	1%	4%
	Yes, definitely	Yes, somewhat	No	Not Answered
9. Do you feel better?	70%	22%	2%	6%
10. Would you recommend our services to others?	80%	9%	2%	9%

III. PROBLEM RESOLUTION

QA is working on developing data points to track and examine regarding problem resolution.

DHCS has identified several categories to capture grievances that are submitted to the BHP.

This slide presents the number of grievances submitted per category in Q3 FY23-24.

DHCS Category	Number This Quarter
Related to Customer Service	1
Related to Case Management	3
Access to Care	0
Quality of Care	13
County (Plan) Communication	0
Payment/Billing Issues	0
Suspected Fraud	0
Abuse, Neglect, or Exploitation	0
Lack of Timely Response	0
Denial of Expedited Appeal	0
Filed for Other Reasons	0



IV. BENEFICIARY OUTCOMES & SYSTEM UTILIZATION

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AG-2: Maintain or improve the following hospital-related measures.

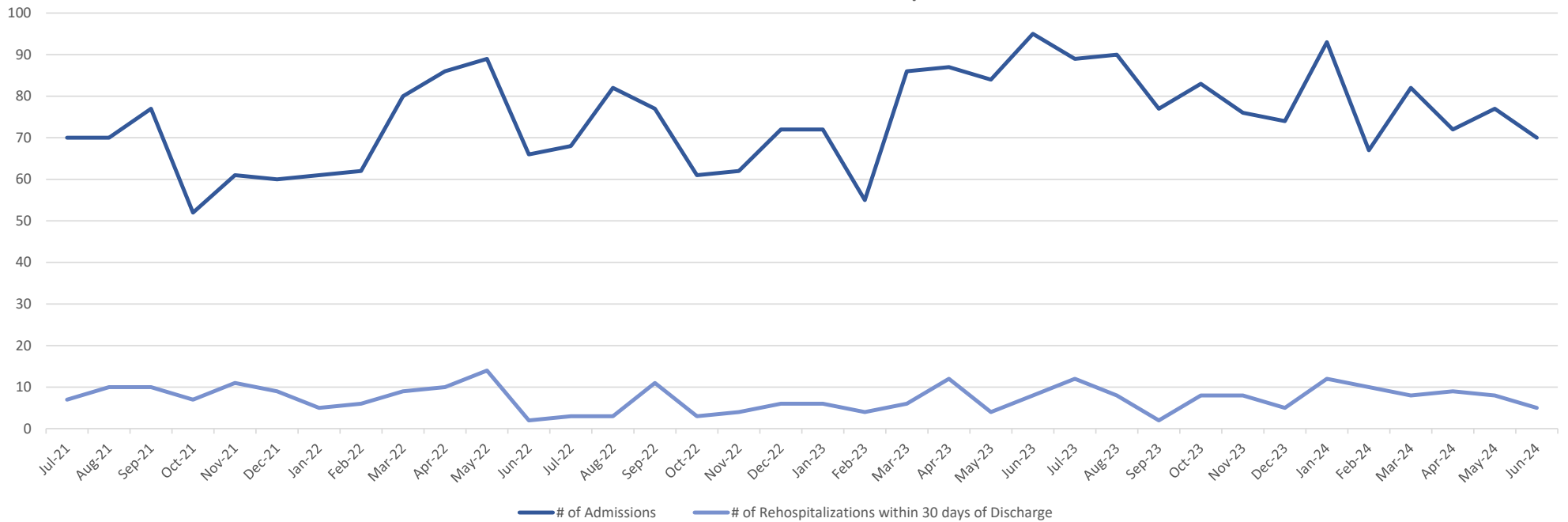
Goal:

- Maintain a monthly average of less than 84 total hospitalizations
- Maintain an average of 17% or less of clients re-hospitalized within 30 days of discharge.

Month	Total Adult Inpatient Hospitalizations	Total Adult Discharges	Total #/% Adult Rehospitalizations w/in 30 days of discharge	
Jan.	72	72	9	16%
Feb.	77	74	8	13%
Mar.	70	63	5	9%
Total	219	209	22	10%

IV. BENEFICIARY OUTCOMES & SYSTEM UTILIZATION

Adult Admissions & Re-Hospitalizations



IV. BENEFICIARY OUTCOMES & SYSTEM UTILIZATION

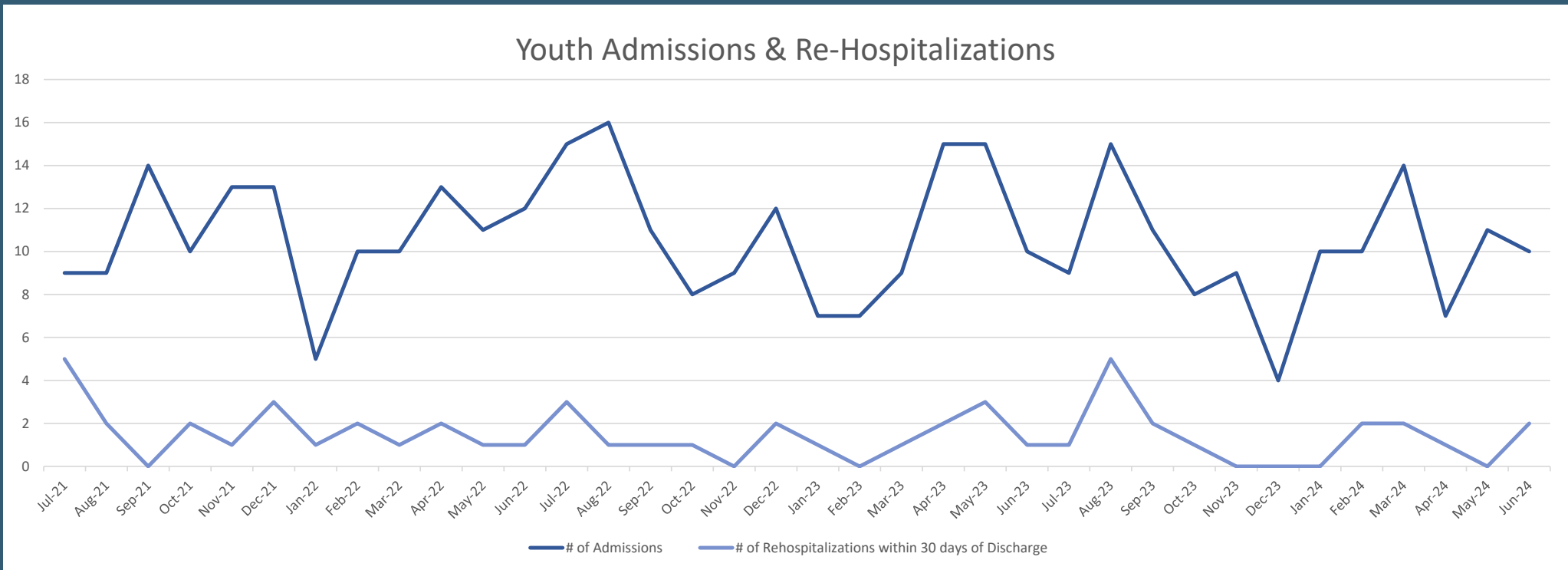
AG-3: Maintain or improve the following hospital-related measures.

Goal:

- Maintain a monthly average of less than 11 total hospitalizations
- Maintain an average of 10% or less of clients re-hospitalized within 30 days of discharge.

Month	Total Child Inpatient Hospitalizations	Total Child Discharges	Total #/% Child Rehospitalizations w/in 30 days of discharge	
Jan.	7	5	1	13%
Feb.	11	9	0	0%
Mar.	10	9	2	20%
Total	28	23	3	11%

IV. BENEFICIARY OUTCOMES & SYSTEM UTILIZATION



IV. HEDIS MEASURES

Not Submitted

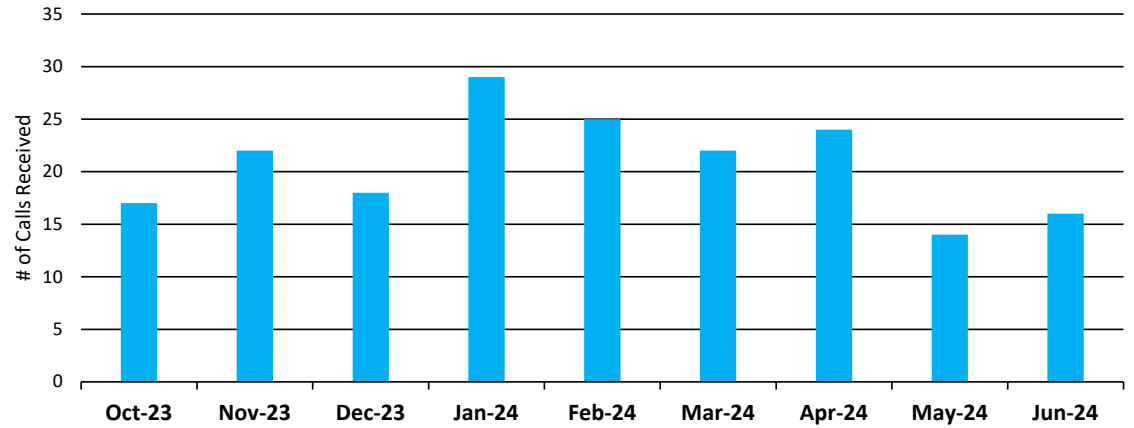
Antidepressant Med Management:								
# of Adults w/ Major Depression Dx treated with Antidepressant	Effective Acute Phase (12 weeks)	Effective Continuation Phase (6 months)	Solano FUH %		California FUH %		*National FUH %	
			12 wk.	6 mo.	12 wk.	6 mo.	12 wk	6 mo
408							60.80%	44.10%

APP – Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics:					
# of total youth in MHP on Medication	Total # of youth newly prescribed an antipsychotic medication	# of youth receiving psychosocial care as 1 st line treatment	Solano APP%	California APP %	National APP %
120	20	16	80%		58.6% (2021 NCQA)

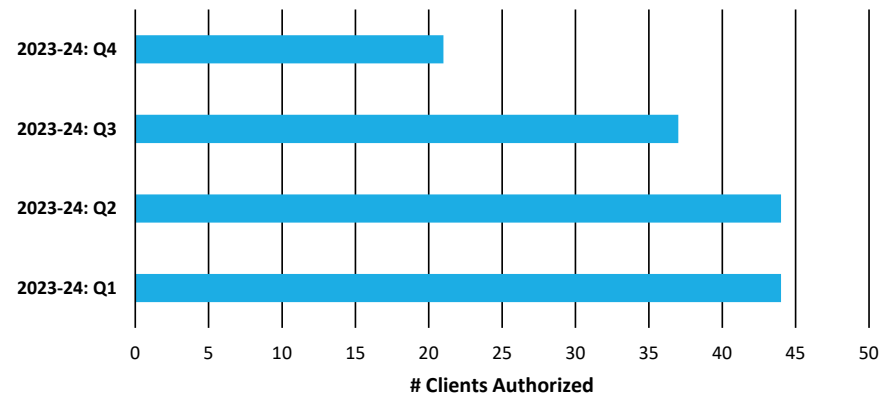
SAA - Adherence to Antipsychotic Medications for Individuals with Schizophrenia					
Total # of adults (18 yrs and older) in MHP	Total # of adults w/ Schizophrenia or schizoaffective disorder prescribed an antipsychotic medication	# of adults w/ these Thought Disorders remained on their antipsychotic medication at least 80% of treatment period	Solano SAA%	California SAA %	National SAA %
	783				59.7% (2021 NCQA)

IV. CO-OCCURRING CARE

Calls Referred to SUD Services



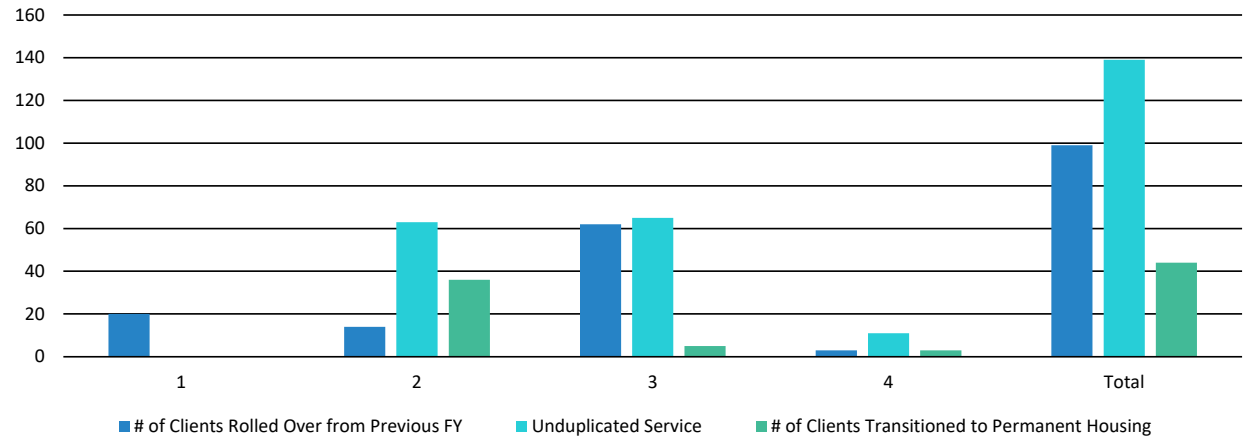
Non-Medical SUBG Services



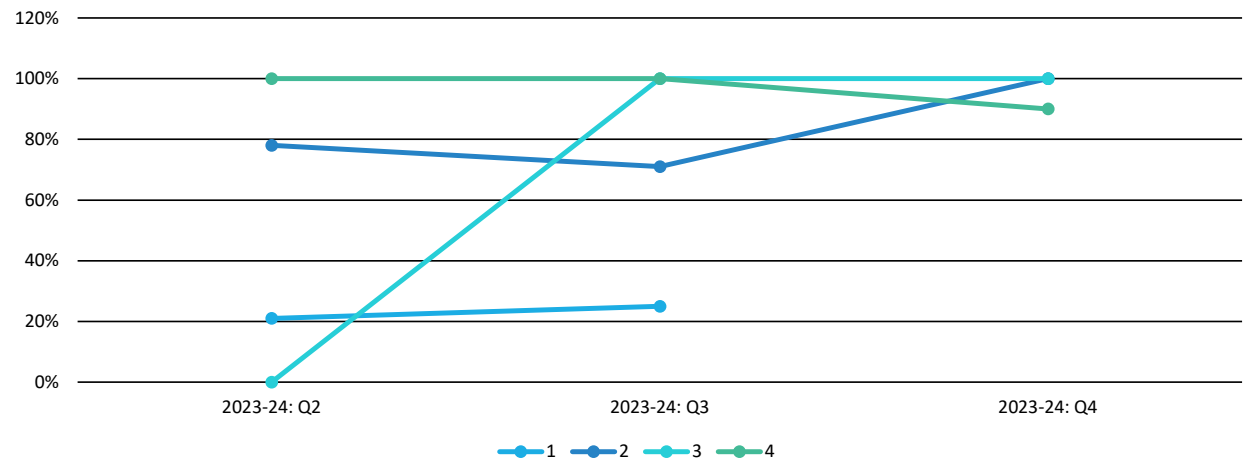
MHSA HOUSING DATA

- MHSA Housing Data
- Quarter 4

MHSA Housing Data



Annual Goal Percentage





V. SERVICE ACCESS & TIMELINESS

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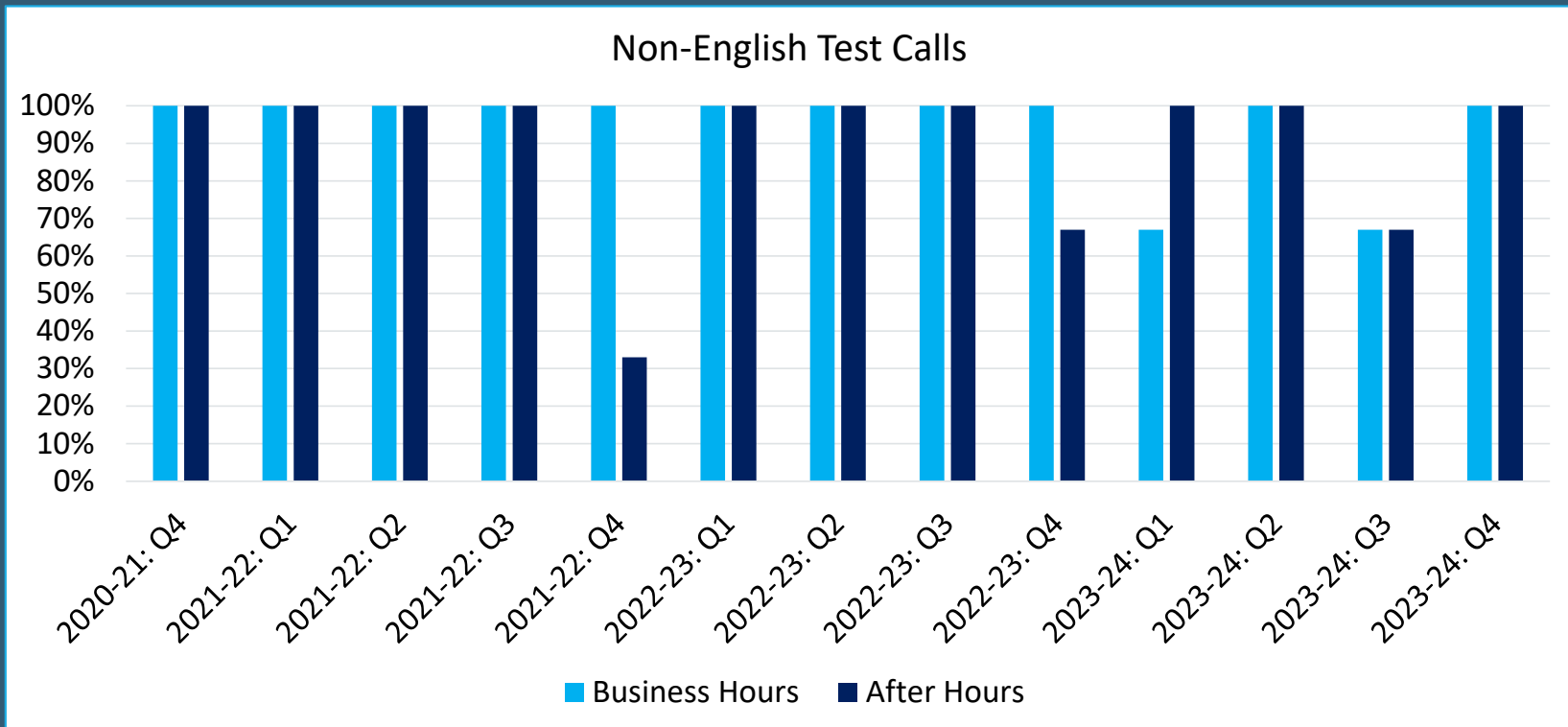
AG-5: Access test call performance

Goal:

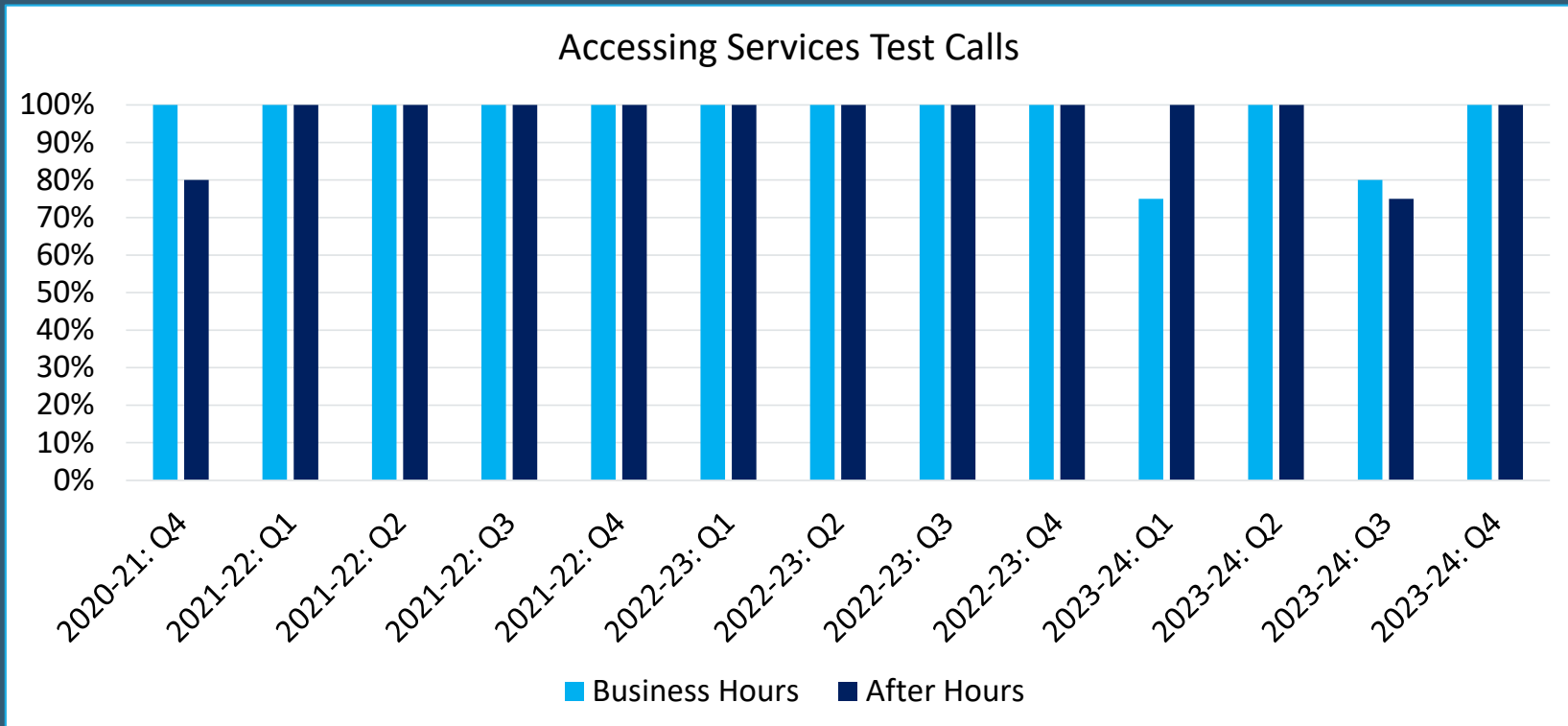
1. Minimum of 4 test calls will be made per month
2. Test for language capabilities
3. Test for appropriate information provided
4. Test for appropriate logging of all calls

	Bus. Hours or After Hours	# of Test Calls	# of Test Calls that Met Standards	% of Test Calls that Met Standards	% of Test Calls that Met Standards Last Quarter
Language(s) Tested: <u>Farsi, Spanish, Arabic</u>	B	3	2	100%	67%
	A	2	2	100%	67%
Info provided for accessing SMHS (including getting an Ax)	B	6	6	100%	80%
	A	3	3	100%	75%
Info provided for treating an urgent condition	B	--	--	--	--
	A	--	--	--	--
Info provided for Problem Resolution/ Fair Hearing	B	--	--	--	100%
	A	2	1	50%	100%
Logging calls	B	6	6	100%	100%
	A	6	3	50%	67%

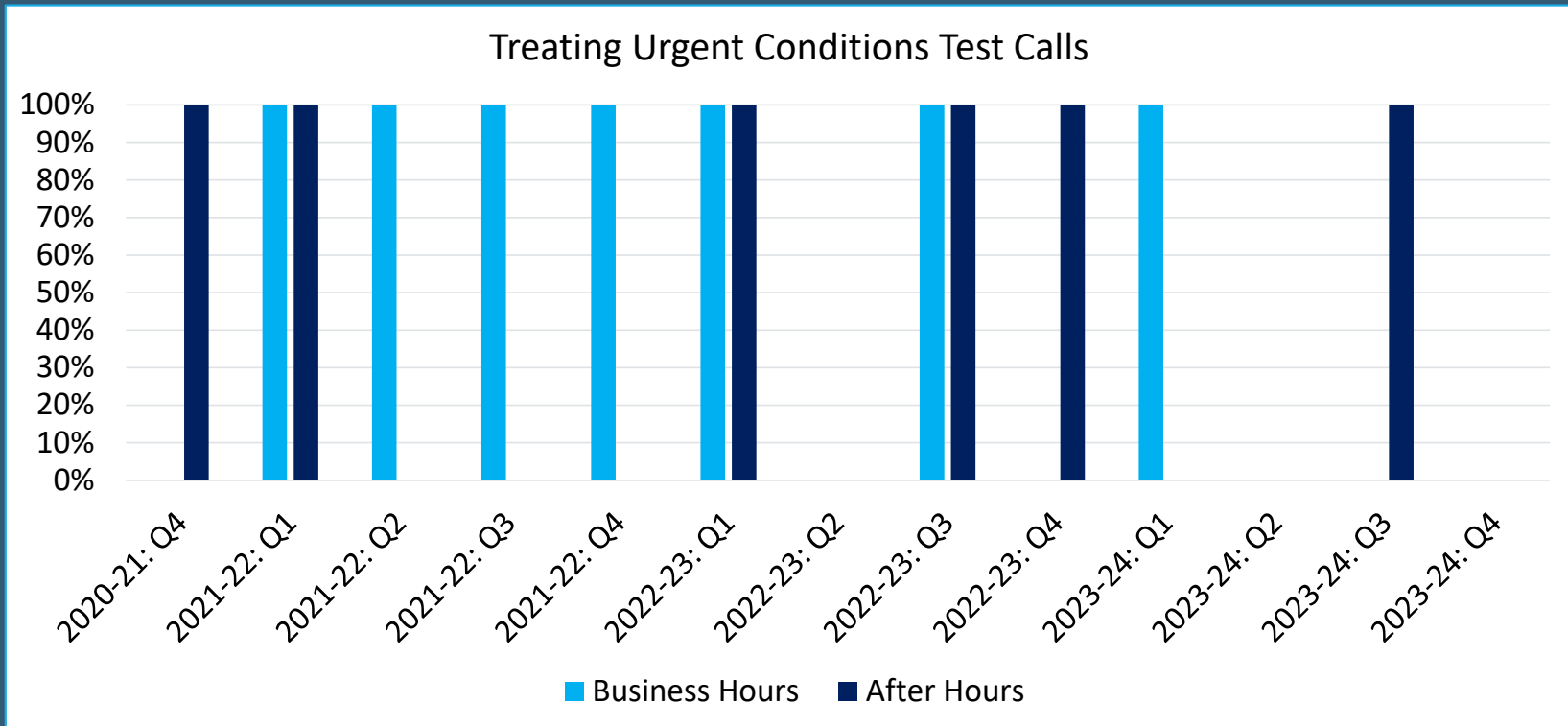
V. SERVICE ACCESS & TIMELINESS



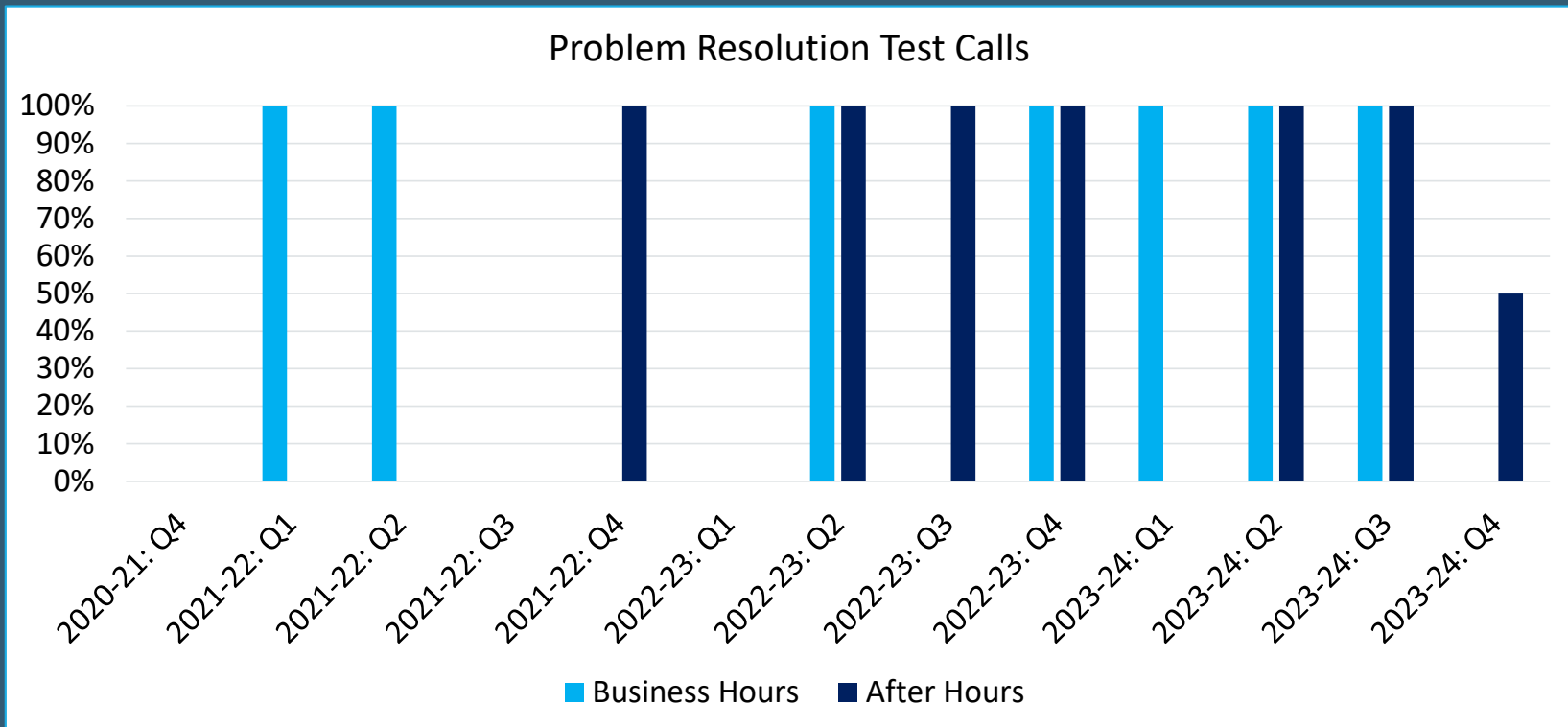
V. SERVICE ACCESS & TIMELINESS



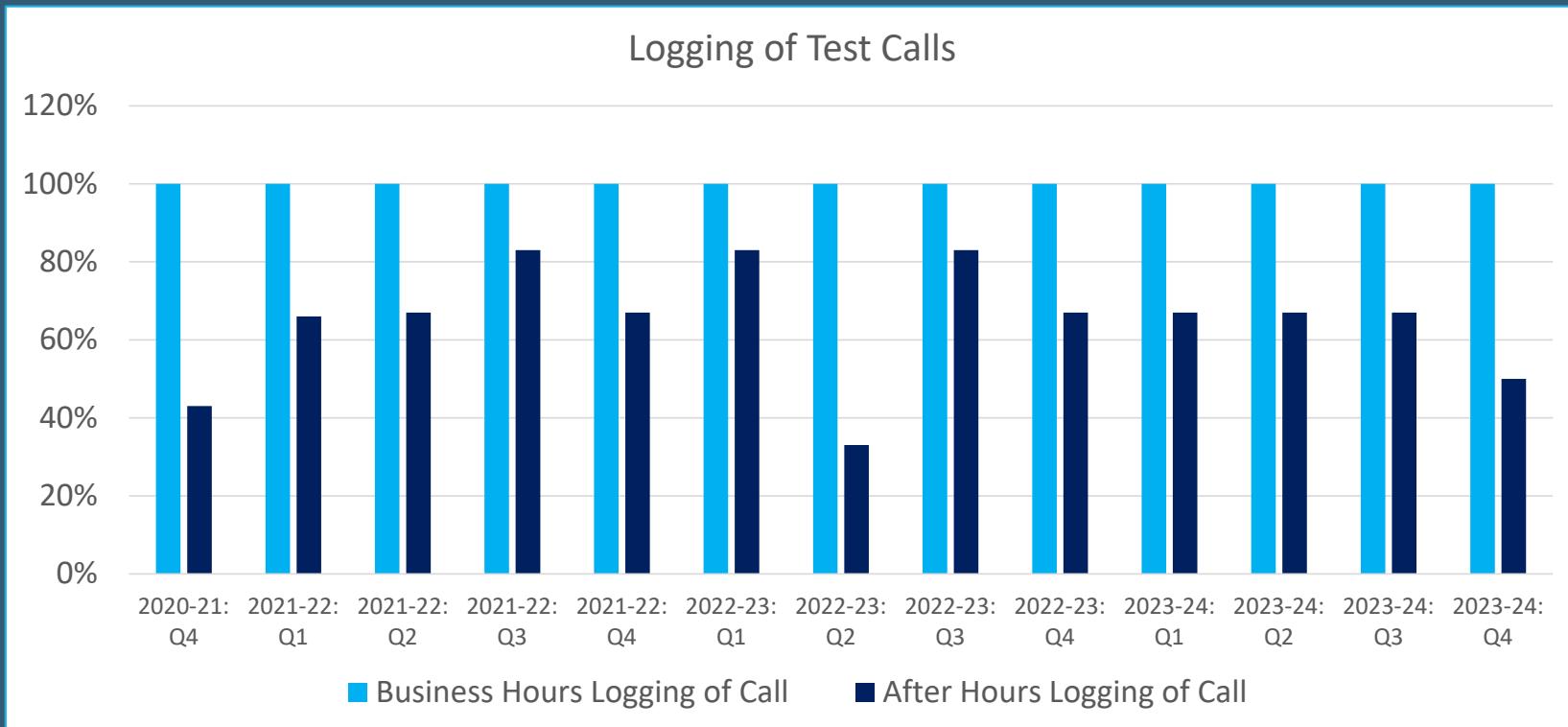
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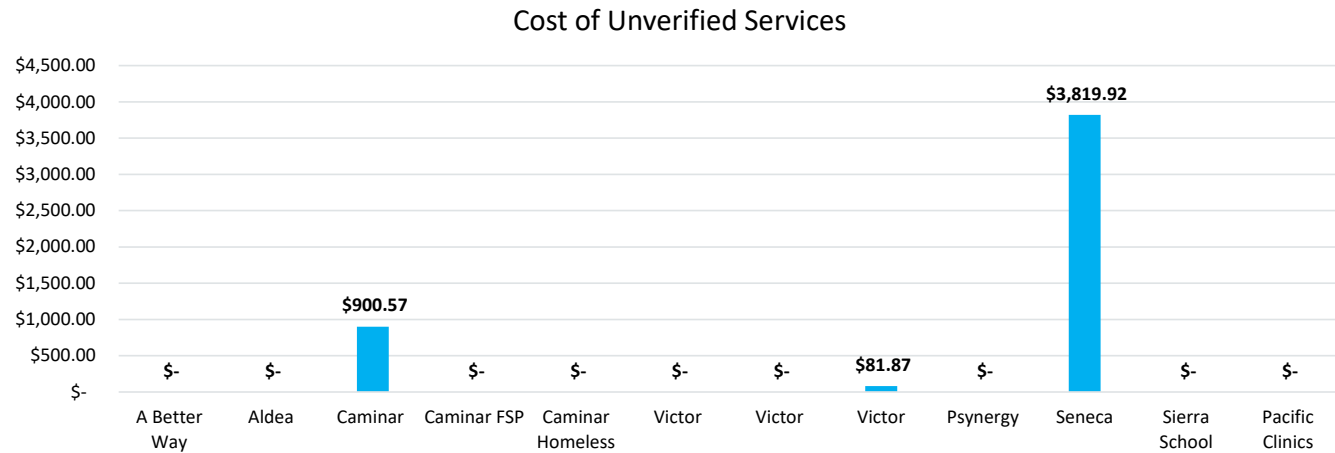
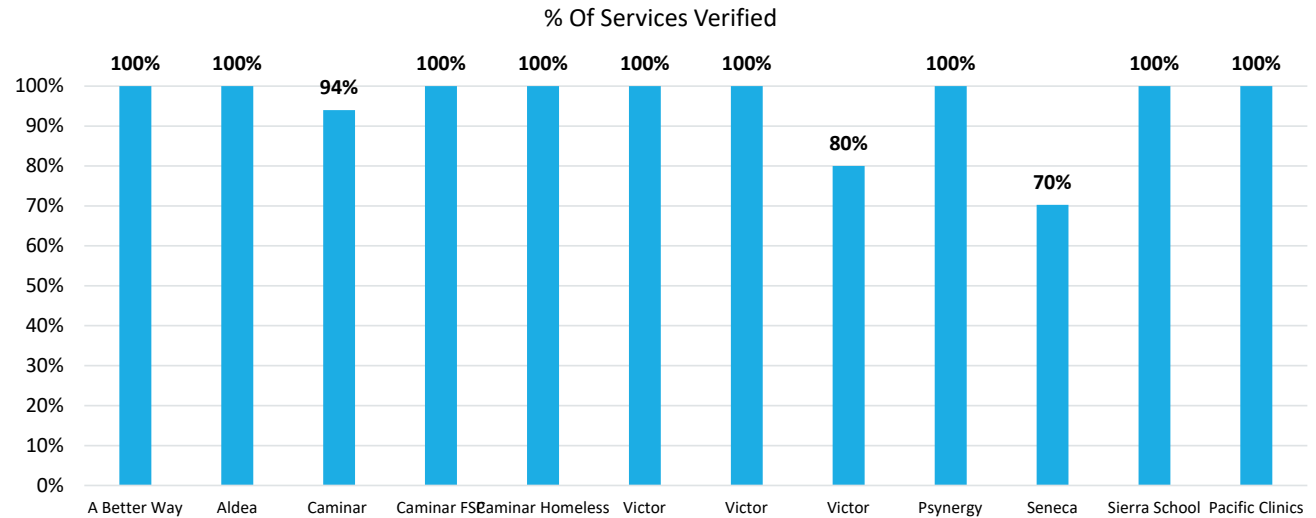
VII. PROGRAM INTEGRITY

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AG-3: Service Verification

Goal: The MHP will achieve 90%-100% accountability for each service identified during the sampling period (services not verified will be repaid).

- Measurement 1: 100% of all applicable programs will participate in the Service Verification process
- Measurement 2: 90% - 100% of services will be verified during the Service Verification week (FY 23/24 baseline: 93%)





VIII. QUALITY IMPROVEMENT

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AG-1: Annual Utilization Review Audits

Goal: The following processes are in place to monitor provider compliance with CalAIM and CCR Title 9 documentation standards:

1. At least 90% of UR Audit Reports will be submitted within 60 days after the audit alert period
2. At least 90% of reviewed programs requiring a CAP will submit one that meets QA standards within prescribed timelines

VII. QUALITY IMPROVEMENT

AG-1: Annual Utilization Review Audits

Contracted Programs

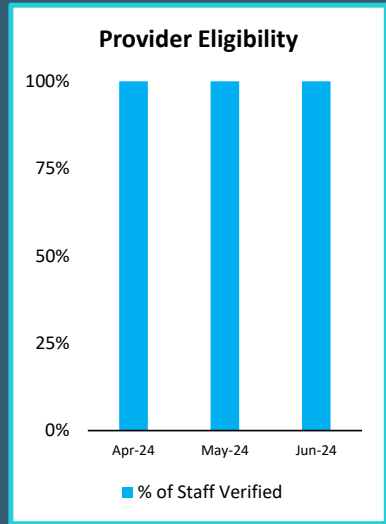
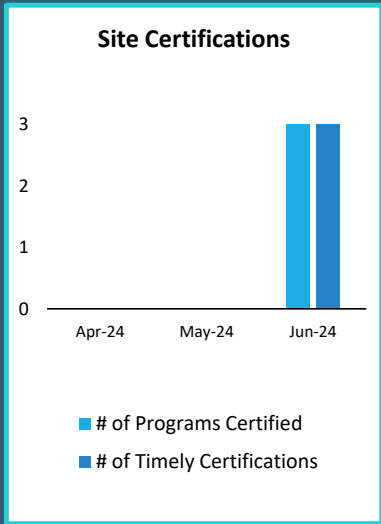
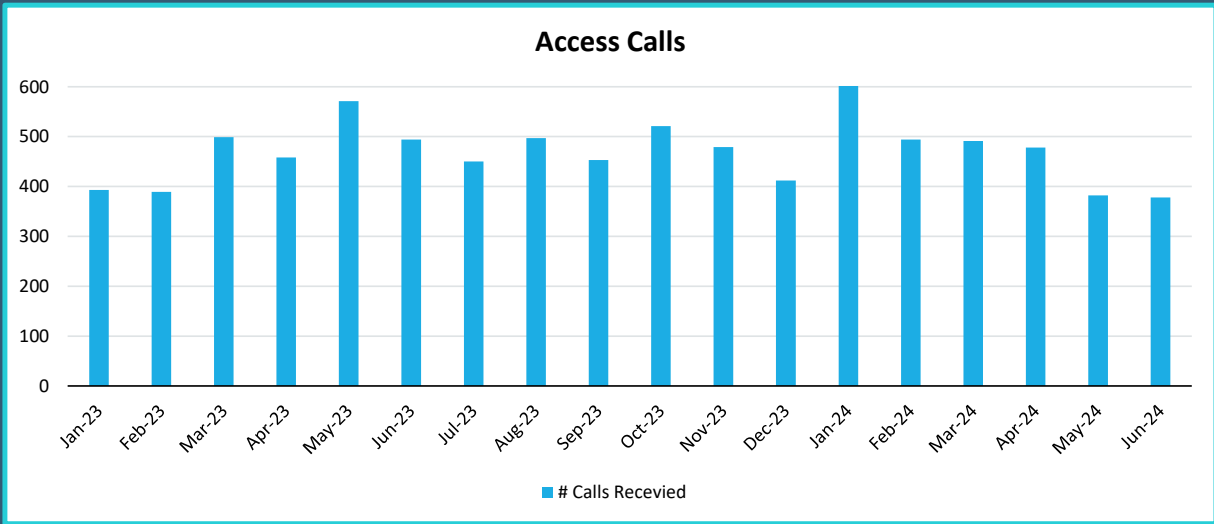
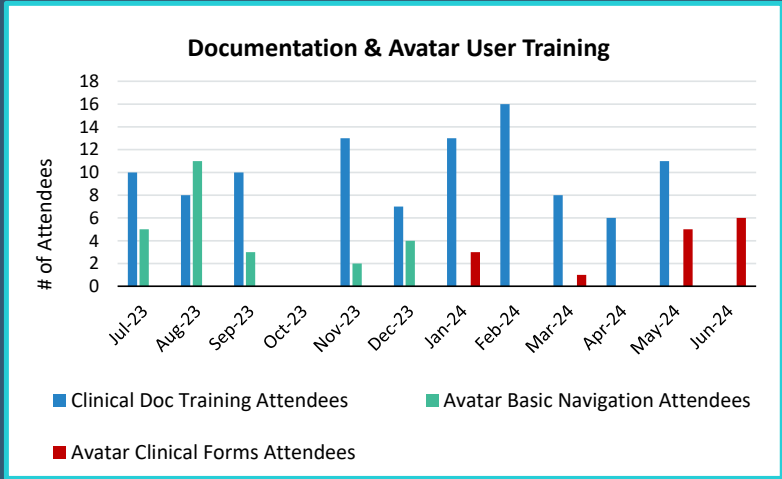
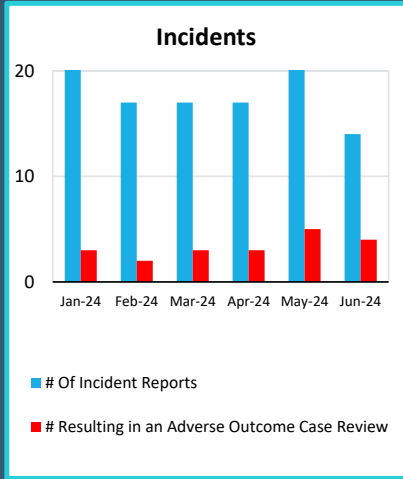
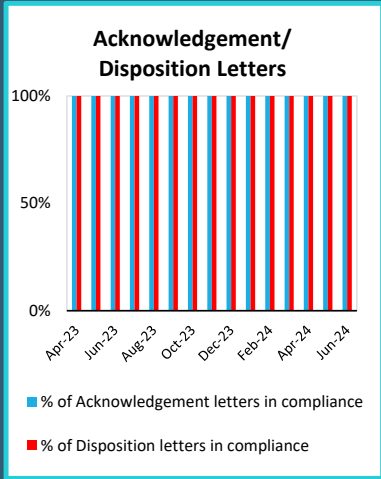
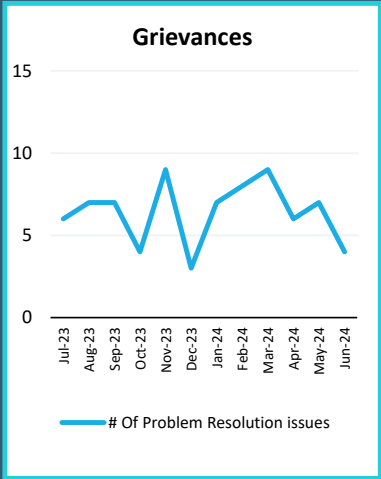
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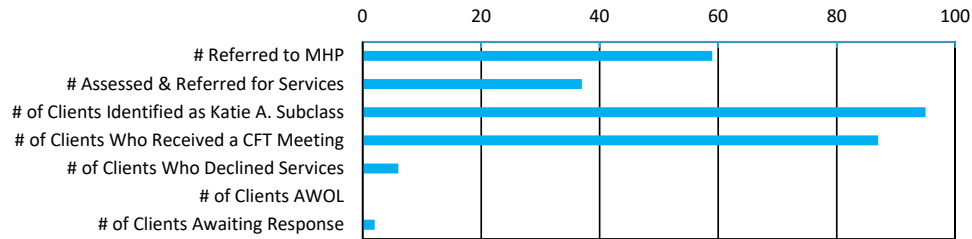
Program	Days to Complete Report (60 days or less)	Required a CAP	Days to Submit a CAP (60 days or less)	CAP Resolution Status
Contractor A	48	Yes	60	Unresolved then Resolved
Contractor B	Pending	Yes	Pending	
Contractor C	113	Yes	56	Resolved
Contractor D	190	Yes	Pending	
Contractor E	272	Yes	76	Pending
Contractor F	148	Yes	11	Pending
County G	71	Yes	60	Resolved
County H	148	Yes	Pending	
County I	80	Yes	29	Resolved
County J	218	Yes	Pending	
County K	67	Yes	Pending	
County L	197	Yes	Pending	
County M	46	No	n/a	n/a



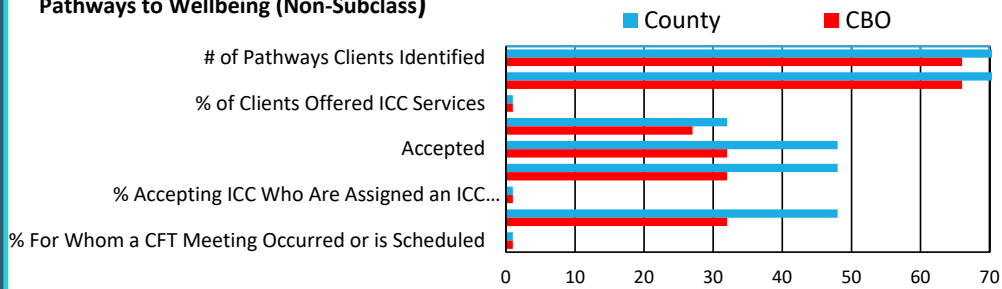
QUALITY IMPROVEMENT DASHBOARD



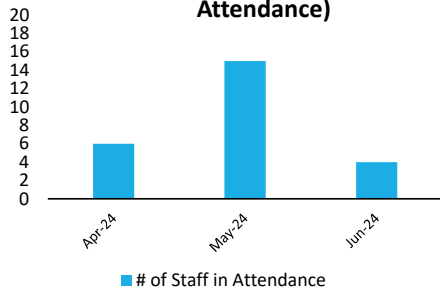
Pathways to Wellbeing (Katie A. Subclass)



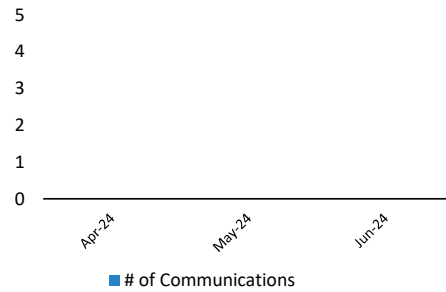
Pathways to Wellbeing (Non-Subclass)



Compliance Training (# of Staff in Attendance)



of Compliance Communications

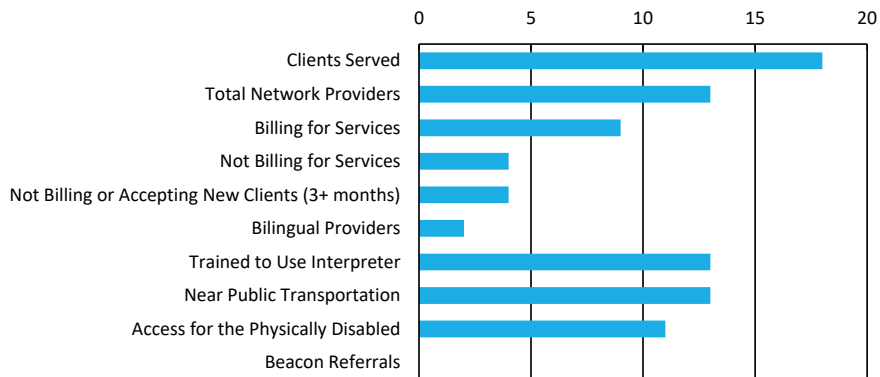


Youth Medication Monitoring

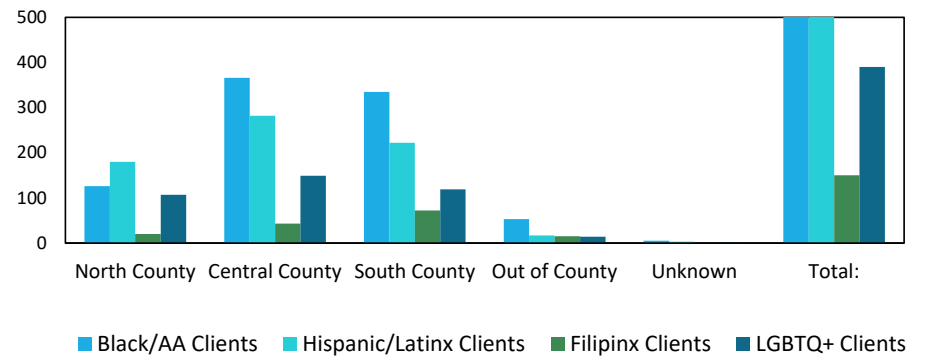
Quarter 4

Population	# of Youth on 1 or More Psychotropic RX	# of Youth Age 0-5 on More Than 1 Psychotropic RX	# of Youth Age 6-11 on More Than 2 Psychotropic RX	# of Youth Age 12-17 on More Than 3 Psychotropic RX	# of Youth on 2 or More Antipsychotic RX
Foster Youth	0	0	0	0	0
Non-Foster Youth	9	0	4	5	0
Totals	9	0	4	5	0

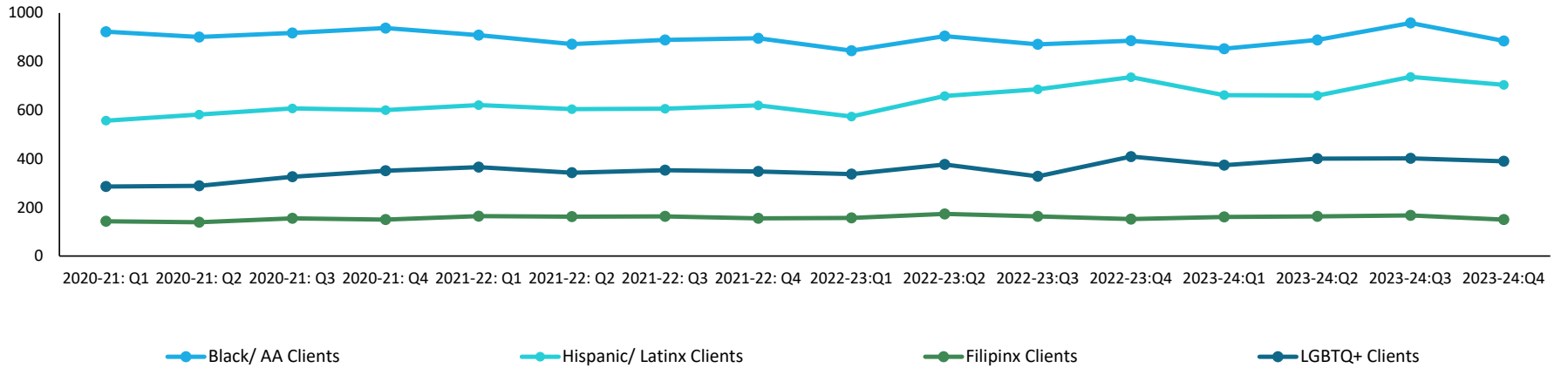
Managed Care Provider Network



Regional Utilization by Cultural Group



Total Utilization by Cultural Group



NEXT MEETING:

Quality Improvement Committee
FY 2024-2025: Quarter 1
Thursday November 14, 2024
1:30pm – 3:30pm

Solano County Behavioral Health
Quality Assurance
(707) 784-8323

QualityAssurance@SolanoCounty.com