

County of San Luis Obispo County Quality Support Team  
DMC-ODS Work Plan, Fiscal Year 2019-2020

**QST Work Plan:**

The annual QST Work Plan identifies key areas that will be a focus of the County of San Luis Obispo’s DMC-ODS 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), the Intergovernmental Agreement and feedback from EQRO to determine priorities. The Work Plan Evaluation will detail the results of our improvement efforts over the course of the year.

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

**Measurable Objectives (shared with the MHP):**

- 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) that is sufficient to include a full array of DMC-ODS services based on ASAM level.

Planned Steps:	Results:
Measure service delivery regionally	
Track utilization of services (# of services by type and cost per beneficiary)	
Complete annual 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

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	

**Goal # 4: Monitor attendance rates for and outcomes of intake assessments**

**Measurable Objective:**

Planned Steps:	Result:
Track screening follow-up:	
Analyze ASAM level of care recommendations	

**Goal # 5: Increase capacity to serve minority beneficiaries**

**Measurable Objective:**

Increase the percentage of Latino clients served by 5% after establishing baseline

Planned Steps:	Result:
Measure Penetration Rate (PR) annually	
Maintain bilingual staff capacity at all key points of contact	
Continue to support bilingual preferred hiring and expansion of the Promotores project to all areas of the county to expand capacity to serve Latino consumers	

**Goal # 5: Maximize consumer satisfaction**

**Measurable Objective:**

Ensure consumer satisfaction as evidenced by responses to the Treatment Perception Survey (TPS). Satisfaction questions will be rated “Strongly Agree” or “Agree” by at least 85% of respondents.

Planned Steps:	Results:
Implement TPS	
Evaluate responses and analyze for trends and improvement opportunities	
Continue training efforts to strengthen staff recovery orientation competencies	
Consider client access and satisfaction when looking at service hours and location	

**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 quarterly DHCS report	
Track # and % of NOABDs by type	

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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.

Planned Steps:	Results:
Track provider appeals	
Monitor and report outcome and timeliness of resolution	

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

**Measurable Objective (combined with MHP):**

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 DMC-ODS staff will attend documentation training annually
- Establish Practice Guidelines for Youth Mental Health Assessment

Planned Steps:	Results:
Complete and distribute Documentation Guideline update (annually and as needed)	
Establish training schedule to include all County operated and contractor sites; provide regular training at sites and at new employee orientation	
Publish a bimonthly documentation tips newsletter	
Track attendance at face-to-face and completion of E Learning documentation training (annually)	

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

**Objectives:**

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

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

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Planned Steps:	Results:
Develop and implement a monthly audit schedule to include all sites	
Conduct comprehensive audits quarterly	
Examine utilization trends and consistency in authorization decisions	
Conduct more targeted review of cases as documentation concerns or other issues emerge	

**Goal # 11: Develop improved Site Certification and monitoring 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:
Conduct annual site monitoring visits	
Revise monitoring tools as needed	
Promptly follow up with completing and reporting of CAPs	
Ensure that each site maintains current DMC certification	
Obtain SUD Treatment certification for all clinic sites	

**Goal # 12: Monitor the safety and efficacy of medication practices**

**Measurable Objective (shared with MHP):**

Create a standardized set of tools and practice guidelines for prescribers

Monitor prescribing practices during regular peer review

Planned Steps:	Results:
Monthly peer review of medication support service types	