

Behavioral Wellness Quality Improvement Committee Charter

Mission Statement

The Quality Improvement Committee (QIC) focuses on the continual quality improvement for clients served within the Behavioral Wellness system of care and recovery. The QIC is chartered by the Behavioral Wellness Executive Team to prioritize and subsequently direct the implementation of agency-wide quality improvement projects and maintain adherence to the regulatory requirements of the Mental Health Plan operation.

Responsibility

As per the Mental Health Plan contract, the QIC shall review the quality of specialty mental health services provided to beneficiaries and service recipients throughout the overall Behavioral Wellness system of care and recovery and focus on continuous quality improvement of care to clients. The overarching focus of the Mental Health Plan includes many statutory mandates providing oversight to the administration of the Mental Health Plan within Santa Barbara County. A very substantial aspect of that mandate relates to reviewing and selecting performance indicators and using data to evaluate and improve the performance of the Santa Barbara County Mental Health System of Care and Recovery.

The Quality Improvement Committee is responsible for:

1. Recommend policy decisions
2. Initiate, coordinate, review and evaluate the results of QI activities
3. Review and evaluate performance improvement projects (PIPs)
4. Institute needed QI actions
5. Guide system-wide selection and application of quality improvement methods
6. Ensure follow-up of QI processes
7. Document QIC meeting minutes regarding decisions and actions taken
8. Develop the annual Quality Improvement Work Plan as well as the Evaluation of the Work Plan.
9. Facilitation of routine committee activity reports

The QIC promotes the quality improvement program and supports recognition of both individual and team accomplishments. Its members are responsible for helping create a quality improvement culture. In this culture, employees use quality improvement principles and tools in their day-to-day work, with extensive support and guidance from leadership. The QIC reports to the Executive Team and other management and staff work teams. Its executive sponsors play a critical role in maintaining leadership support.

QI and QA

In addition to the QIC responsibility of review and advisement on data tracking and outcome measurements required by regulations, the Quality Improvement (QI) function is critical to our overall system and System Change. While Quality Assurance or

Assessment (QA) is usually associated with monitoring compliance with regulations, it provides a floor or minimum standard for achieving a basic level of quality in a public mental health system. Quality Improvement is a process whereby mental health providers continuously work to enhance the quality of services provided above the basic level of quality achieved by QA activities. QI is achieved by setting goals and objectives, developing performance indicators to measure the objectives, and collecting data on system performance. Results are analyzed and returned to the QIC and programs so that services and programs can be modified, if necessary, so they better achieve the program's goals.

Another traditional task of County QI operations is to translate and incorporate new and existing rules, regulations, and interpretations made by outside entities into our ADMHS MHP QA process and assure that Santa Barbara County consistently attains and maintains compliance with all requirements.

QIC Activities

1. Collect and analyze data to measure against the goals, or prioritized areas of improvement that have been identified;
2. Identify opportunities for improvement and decide on which opportunities to pursue;
3. Identify relevant committees internal or external to ensure appropriate exchange of information with the QIC;
4. Integrate input provided through EQRO and DHCS reviews;
5. Obtain input from providers, beneficiaries and family members in identifying barriers to delivery of clinical care and administrative services;
6. Design and implement interventions for improving performance;
7. Measure effectiveness of the interventions;
8. Incorporate successful interventions into the Behavioral Wellness/MHP operations as appropriate; and
9. Review outcomes from beneficiary grievances, appeals, expedited appeals, fair hearings, expedited fair hearings, provider appeals, and clinical records review as required by CCR, Title 9, section 1810.440 (a) (5).

Membership

Membership of the QIC represents the overall mental health system and Mental Health Plan and includes representation from within Behavioral Wellness (management and direct service staff) as well as external partners such as organizational providers, physical health care providers or administrators, family members, beneficiaries, mental health commission representation, and other collaborative partners. Meetings will be held monthly and generally last 1.5 hours.

Current Membership

Names to follow