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## Yolo MHP Feedback to CalEQRO Outside Review Draft Report FY14-15

All feedback must be sent to CalEQRO within 10 business days of receiving the review draft.

**Submitted By: Samantha Fusselman** Date Submitted: August 25, 2015

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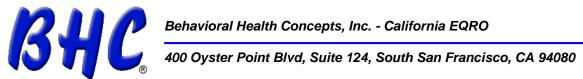
Page Number	Report Statement	MHP Clarifying Response	MHP Request for Change	CAEQRO Response
10	Response to Recommendation #1:  "First contact to psychiatry appointment is not currently tracked, but the MHP has the capability"	While the EHR technically has the capability, the MHP had not previously developed the methodology to accurately capture the pertinent data. The MHP has been working internally and with other Netsmart counties to define "first contact to psychiatry" and to identify the related data points.	Please edit the report follows:  "First contact to psychiatry appointment is not currently tracked, but the MHP has the capability and is developing the methodology to accurately track this information."	Change accepted.
11	Response to Recommendation #5, last bullet:  "It is unclear what other measures the MHP has taken to increase psychiatry capacity"	Three concrete interventions were discussed during the review and are sited in the draft report, along with significantly improved timeliness metrics. Please refer to the Timeliness Self-Assessment, pages 2-3, which reflects a 71% (from 56 days to 16 days) reduction in average wait times to follow-up appointments with medication support staff after hospitalization.	<ul> <li>Please remove the last bullet under Response to Recommendation #5</li> <li>Please change the rating to "Fully Addressed." It is our belief that we addressed this recommendation as fully as possible within the review period.</li> <li>Please edit the report with the following additions:</li> <li>"Efforts to address this recommendation have contributed to</li> </ul>	Change accepted.



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wait times for initial clinical

www.calegro.com Page **Report Statement CAEQRO Response MHP Clarifying Response MHP Request for Change** Number a 71% (from 58 to 16 days) reduction in average wait times to improved timeliness to follow-up appointments with medication support staff after hospitalization." Slight correction to the name of the provider Please edit the report as follows: **Changes in the MHP** involved. Please see suggested rewrite. **Environment and Within** "Under contract with Communicare **the MHP** – Access to Care Health Centers, a Federally Qualified Health Center (FQHC), the MHP "The MHP implemented the implemented the program program 'Community Outreach 'Community Outreach Rural Rural Engagement' (CORE), an Engagement' (CORE). CORE, an MHSA outreach and engagement 12 Change accepted. Innovation program, is an outreach program to reach Hispanic and engagement program designed to communities through reach underserved Hispanic Communicare Promotores communities through the use of Program (a federally qualified Promotores." health center) with a migrant farmworker focus, linked into the community with the health center" There was no mention of the redesign of the • Please edit the report with the **Changes in the MHP** "front door" in this section, and we believe this following addition: **Environment and Within** was a significant change in the MHP environment. the MHP – Access to Care The MHP respectfully requests the EQRO include "Effective July 1, 2014, the MHP the suggested language. initiated a complete re-design of the Change accepted. 12 initial access point for beneficiaries. By incorporating a formalized triage process, the MHP is better able to determine Medical Necessity. Where



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			assessment had previously been two months, new clients are now able to be seen within one week for an assessment."	
	Changes in the MHP Environment and Within the MHP – Timeliness of Services	The MHP believes this improvement in timeliness to be a significant change in the MHP environment and respectfully requests this inclusion in this	<ul> <li>Please edit the report with the following addition:</li> </ul>	
12		section of the report.	"The MHP reduced its average wait time to first clinical assessment by nearly half, from an average of 32 days in FY13-14 to an average of 18 days in FY14-15."	Change accepted.
	Changes in the MHP Environment and Within the MHP – Quality of Care	Roughly half of the MHP management team is new, which we believe to be a significant change in the MHP environment.	Please edit the report with the following addition:  (The AMP In the Property of the Prop	
			"The MHP has undergone significant leadership change since the previous EQRO review. After external recruitment, the County appointed a	
12			new Mental Health Director/Alcohol and Drug Administrator in March 2014. Since then, the MHP Director	Change accepted.
			has replaced two managers – the Adult Systems of Care manager (September 2014) and Quality Management Manager (December	
			2014) – and created and filled a new position - Clinic Manager (December 2014.)"	

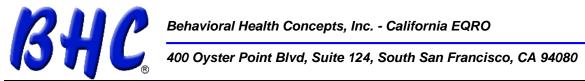


quantitative analysis of the strategies, but rather

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www.calegro.com Page **Report Statement CAEQRO Response MHP Clarifying Response MHP Request for Change** Number The MHP experienced the loss of The MHP requests a couple of minor word-choice Please edit the report as follows: its long time QI manager last changes, as indicated by the underlined font in the year. This gave the executive adjacent columns. "The MHP's long-time QI manager left team the impetus needed to rethe County in December 2014. This gave the executive team the impetus examine its commitment to a data driven, consumer-centric needed to re-examine its commitment CQI team. Personnel outreach to a data driven, consumer-centric proceeded and an experienced CQI team. Personnel outreach CQI professional was recruited proceeded and an experienced CQI along with a clinical psychologist professional was recruited along with Change accepted. 12 and experienced LPHAs as a clinical psychologist and support staff. While the new experienced LPHAs. While the new team is not yet complete, (an team is not yet complete, (sufficient IT experienced trainer and staff to support the underlying datasufficient IT staff to support the store are yet to be hired) the MHP has underlying data-store are yet to significantly advanced its CQI be hired) the MHP has position." significantly\ advanced its CQI position. KC Access 1A - The MHP's new The Cultural Competence Committee is not under Please edit the report as follows: QI team revitalized the cultural the Quality Management team. Rather, the competence committee making Cultural Competence Coordinator reports to the "The MHP recently hired a new cultural competence an Mental Health Services Act manager. For cultural competence coordinator and organizational priority... additional information, please refer to the Yolo 25 revitalized the cultural competence Change accepted. Significant Changes and Initiatives FY14-15 committee, making cultural document submitted in advance of the review. competence an organizational priority..." KC Access 1B - While the The new QI team has not precluded time for • Please edit the report as follows: Change accepted. 26

executive team is examining its



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	system flow change, QI personnel have precluded time to allow for opportunity for quantitative analysis of these strategies	had not been in place long enough to engage in analysis by the time of the EQRO review.	"While the executive team is examining its system flow change, QI personnel had <u>not yet had</u> <u>opportunity</u> to conduct quantitative analysis of these strategies."	
26	KC 1C - The MHP also works with the Bridge to the Homeless.	The program was called Bridge to Housing.	<ul> <li>Please edit the report as follows:</li> <li>"The MHP also <u>participated in a highly publicized multi-agency collaboration, Bridge to Housing."</u></li> </ul>	Change accepted.
29	KC 2A - The MHP is aware that it is meeting or exceeding its own standards by a substantial basis and has <u>not</u> appropriately set new standards. The MHP defines first appointment as first clinical assessment. The MHP's goal is 14 days, and it meets its goal 53% of the time, with an average of 18 days.	The word "not" appears to be a typo.	Please edit the report as follows:  "The MHP is aware that it is meeting or exceeding its own standards by a substantial basis and has appropriately set new standards. The MHP defines first appointment as first clinical assessment. The MHP's goal is 14 days, and it meets its goal 53% of the time, with an average of 18 days."	Change accepted.
29	KC 2D – PC rating The MHP did not report the number of hospital admits, but reported the number of follow up appointments (269), stating that it meets its goal of 7 days 57% with an average of 16 days. The MHP did not report the number of hospitalizations, but the "unique hospital	It appears that the numbers reported were entered into the wrong field in the Timeliness Self-Assessment. There were 269 admissions in FY 14-15 through 2/27/15, with 142 follow-up appointments. Please refer to the Yolo Timeliness Self-Assessment FY14-15 submitted prior to the review.	<ul> <li>The MHP respectfully requests that the rating for KC 2D be changed to Fully Compliant</li> <li>Please edit the report as follows:         <ul> <li>"The MHP reported 269 hospitalizations in FY14-15 through the end of February 2015, with 142 follow up appointments. The MHP reports it met its goal of 7 days FUH</li> </ul> </li> </ul>	Change accepted.



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www.calegro.com Page **Report Statement CAEQRO Response MHP Clarifying Response MHP Request for Change** Number discharges that resulted in an 57% with an average wait time of 16 days, a significant improvement from appointment" (142). an average of 58 days in FY13-14." KC 3H - PC Just as with the MHP has renewed efforts and The MHP respectfully requests that resources to QI and Cultural Competence, so too While the management team the rating for KC 3H be changed to has it renewed its commitment to wellness and includes persons with lived **Fully Compliant** recovery and consumer/family member experience, there is not a employment. specific management position Please edit the report as follows: for a consumer or family The MHP meets four of six criteria for Key member. There is no one that Component 3H, which satisfies the requirement attends the Executive "While the management team for a Fully Compliant rating: includes persons with lived Management Team meetings. A.2 Both the MHP and partner agencies have CFM There are approximately 10 PT experience, there is not a specific supervisory roles. positions for C/F members. management position for a consumer A.3 The MHP CFM staff report to the MHSA There is one FT position with or family member. There are manager who is a member of the MHP leadership Turning Point with benefits, but approximately 10 PT positions for C/F 32 Change accepted. team. members and one FT position with no others. A.4 Supervisory support exists for CFM staff to benefits. In the past Yolo had WRAP maintain and expand in their positions, at both trainings, but the momentum the MHP and provider agencies. seemed to diminish. This past The MHP has renewed wellness and A.6 The MHP has designated positions for CFM year Yolo has had 3 trainings so recovery efforts, offering three WRAP staff. far and have a train the trainer trainings in the past year, with a train class scheduled. There has been the trainer class scheduled in the near much progress due to the new future. " director, but the MHP is still at the beginning stages of implementing a Wellness and Recovery philosophy. KC 3I - NC A number of factual errors were contained within The MHP respectfully requests that the draft report for this Key Component, most 33 The Wellness Center is county the rating for KC 3H be changed to Change accepted.

Partially Compliant

run with 2 FT clinicians and 2 PT



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Page **Report Statement MHP Request for Change CAEQRO Response MHP Clarifying Response** Number consumers dedicated to the notably the staffing and orientation of the Wellness Center and the structure of Cool Beans. Wellness Center and a few • Please edit the report as follows: others that occasionally help out. "The Wellness Center is staffed with 2 Yolo consumers also volunteer FT County clinicians and several PT at the Cool Beans coffee and consumers dedicated to the Wellness snack cart, facilitate some Center. Programming is entirely groups (arts and crafts), work as consumer-driven, and decisions are greeters, answer phones or made during regular member others duties as needed. meetings. The Wellness Center is small (on Yolo consumers are also employed at site) serving exclusively those the Cool Beans coffee and snack cart, receiving services and those that which is fully consumer-run and have received an orientation consumer- supervised. Additionally, class. peers facilitate some groups (arts and crafts), work as greeters for the entire Health Services Department, and answer phones or others duties as needed. The Wellness Center is small (on site) serving exclusively those receiving services and those that have received an orientation class. Plans are in development for an expansion of the site in the Fall 2015." **Spelling Corrections** Participant names Please edit the report accordingly. Change accepted. 58-59

If needed, rows can be added by clicking on the bottom right cell of the table above and hitting the TAB button.

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