



**NORTH SOUND
MENTAL HEALTH ADMINISTRATION**

**QUALITY MANAGEMENT OVERSIGHT COMMITTEE
COMMITTEE MEETING PACKET**

September 27, 2006

QMOC GUIDING PRINCIPLES

The QMOC charge is to guide the quality assurance and quality improvement activities of mental health services within the NSMHA region. In assessing the necessary data and making appropriate recommendations, the QMOC members agree to the following:

- ◆ Help create an atmosphere that is SAFE.

- ◆ Maintain an atmosphere that is OPEN.

- ◆ Demonstrate RESPECT and speak with RESPECT toward each other at all times.

- ◆ Practice CANDOR and PATIENCE.

- ◆ Accept a minimum level of TRUST so we can build on that as we progress.

- ◆ Be SENSITIVE to each other's role and perspectives.

- ◆ Promote the TEAM approach toward quality assurance.

- ◆ Maintain an OPEN DECISION-MAKING PROCESS.

- ◆ Actively PARTICIPATE at meetings.

- ◆ Be ACCOUNTABLE for your words and actions.

- ◆ Keep all stakeholders INFORMED.

Adopted: 10-27-99
Revised: 01-17-01

Draft September 27, 2006
NORTH SOUND MENTAL HEALTH ADMINISTRATION
QUALITY MANAGEMENT OVERSIGHT COMMITTEE AGENDA

Date: September 27, 2006

Time: 12:30-2:30 PM

Location: NSMHA Conference Room

For Information Contact Meeting Facilitator Greg Long/Debra Jaccard, NSMHA, 360-416-7013

Topic	Objective	ACTION NEEDED	Discussion Leader	Handout available pre-mtg	Handout available at mtg	Pg.	Time
Introductions	Welcome guests, presenters and new members		Chair				5 min
Review and Approval of Agenda	Ensure agenda is complete and accurate, determine if any adjustments to time estimates are needed. Meeting will start and end on time.	Approve agenda	Chair	Agenda		3	5 min
Review and Approval of Minutes of Previous Meeting	Ensure minutes are complete and accurate	Approve minutes	Chair	Minutes		5	5 min
Announcements	Inform QMOC of news, events: <ul style="list-style-type: none"> • New NSMHA Staff Positions • Children E & T • FBG Grants • MHD Audit • PIP Update • Payment of filing fees • Allied System Planning • Update on Stolen Laptop/PHI • Letters to QMOC members 	Inform/discuss	Greg/Debra/All				15 min
Comments from the Chair	Update the committee on recent developments that impact QMOC-	Inform	Chair				5 min

	• Board action						
Contracting & Funding Redesign Workplan Meeting Update	Inform QMOC of process and meeting dates to attend	Inform	GREG LONG	Contracting & Funding Redesign Mtgs		9	5 min
Letter to NSMHA from Richard Kellogg, MHD	Review/discuss system implications	Determine next steps	GREG LONG	Copy of Letter		11	10 min
Update on New Authorization Process –Started September 1	Update on NSMHA under a corrective action plan to develop a new authorization process	Approve changes to policy	TERRY MCDONOUGH		Changes made to Authorization Policy-1505		10
Policy Sub-Committee Report	Initiation of more efficient process to develop and come to consensus on policies	Inform and discuss	GREG/DEBRA		Process and list of policies in process/c change		10
Quality in Action Compass Health Block Grant Services	Inform QMOC of use of FBG dollars in connecting consumers discharging from hospitals to outpatient services	Informational	TOM SEBASTIAN				10
Documentation Flow Chart	Meeting canceled in August due to scheduling issues	Deferred until October					0
Date and Agenda for Next Meeting	Ensure meeting date, time and agenda are planned.		All				5 min
*Review of Meeting	Were objectives accomplished? How could this meeting be improved?		All				5 min

Next meeting October 25, 2006, 12:30-2:00

Potential Agenda Items: Exhibit N Report

Critical Incident Report

PIPS

EQRO

Policy Sub-Committee Update

North Sound Mental Health Administration

**Quality Management Oversight Committee
NSMHA Conference Room**

July 26, 2006

12:30 – 2:30

DRAFT MINUTES

Present:

Gary Williams, QMOC Chair, Board of Directors
Greg Long, NSMHA
Deborah Moskowitz, Skagit County Mediation Services
Chuck Davis, Skagit County Mediation Services
Susan Ramaglia, NAMI Skagit
Rochelle Clogston, APN
Karen Kipling, VOA
Debra Jaccard, NSMHA
Mary Good, NSMHA Advisory Board

Absent (not excused):

Joan Lubbe, NSMHA Advisory Board
Russ Hardison, Sea Mar
Terry McDonough, Snohomish County Human Services
Mike Manley, Snohomish County Human Services
Dan Bilson, NSMHA Advisory Board
Maile Acoba, Skagit County Coordinator
Janelle Sgrignoli, Snohomish County Human Services

Excused:

Janet Lutz-Smith, Whatcom County Advisory Board
Dr. June LaMarr, the Tulalip Tribes
Nancy Jones, Snohomish County Human Services

Others Present:

Eason Henderson, Snohomish County ITA (via conference phone)
Diana Striplin, NSMHA

1. Open the Meeting & Comments from the Chair

The meeting was convened at 12:34 p.m. and introductions were made.

2. Agenda

No additions were made to the agenda.

3. Approval of June Minutes

The minutes from June were reviewed. Several corrections were made: the last sentence on item 8 was stricken as it was incorrect, Rochelle was added to present list, and Terry Clark was removed from the attendance. A motion was made to approve the minutes with changes. Motion seconded, all were in favor.

4. Announcements

Greg announced that Debra Jaccard is now Quality Manager at NSMHA. Greg noted Margaret Rojas is now the Contracts Coordinator and Legislative Liaison, but she still wishes to support the Advisory Board. Susan asked who will carry out Margaret's former duties (PR/Consumer Affairs) Greg noted this has not yet been determined. NSMHA has hired a part-time person to do planning for Planning Coordination, his name is Tom Youst. Interviewing is currently ongoing for Quality Specialists.

Greg updated on RSN/King County's proposal for a children's E&T. The proposal was accepted and will be funded by MHD, but there are immediate challenges that need to be worked out such as the location. The E&T is proposed to open Jan. 2007.

Greg noted the region received a 318,000 increase in Federal Block Grant funds. The previous funding will be continued and the additional funding was given to selected proposals submitted.

Greg added that the State financial auditors will be at NSMHA for the next few weeks.

Greg added at the last QMC meeting it was agreed that providers drop the requirement for consent for assessment. This should streamline the access process.

Greg stated that the Board of Directors have approved NSMHA paying ITA filing fees, this will be a substantial drain of funding, estimated at a cost of 500,000 per year. Greg noted there is a lot of advocacy going on to waive filing fees for mental health.

Debra announced that NSMHA will be hosting a “train the trainer” training on August 30th. The training will include how screen for assessment on co-occurring disorders. Individuals who train staff should attend. Debra will pass on additional information via email.

5. Comments from the Chair

Gary noted that at the July Board of Directors meeting, in review of policies approved at June QMOC meeting, the Board requested that policies which come to Board with consensus from QMOC, will go to consensus agenda for board. However if a QMOC member has a varying opinion on a policy they will write a simple paragraph stating their opinion, and this will go to the Board’s action agenda.

Gary noted he is concerned with attendance with this committee, when individuals do not call in and do not attend, shows lack of concern. Gary recommended that we send a letter to all QMOC members stating that membership will be reviewed and the issue will be sent to Board of Directors. Deborah suggested that something in the letter ask the individual for a response on whether they want to attend QMOC or not.

6. Stolen Laptop and Release of Consumer PHI

Greg noted in late June a laptop was stolen from the vehicle of a Sound Data employee. Between 6000-8000 names of consumers were on the laptop. The data was password protected, but not encrypted. Greg noted that everyone feels badly that this happened. Compass Health has worked hard in responding to this incident and has sent notification to clients and staff in how to deal with this. Rochelle noted there are about 800 notification letters left to send out of about 6000, which need research on getting correct address. Rochelle noted the one media contact about the incident was a Bellingham radio station. Rochelle noted the media coverage was relatively positive. Gary noted as Whatcom County Coordinator he should have been notified of this media coverage. Chuck noted Ombuds has not heard anything about the incident yet. Greg noted this has demonstrated the need for increased security measures on data. Rochelle noted only a skilled technician could access the data. Gary noted that while unfortunate incidents happen, anything that can be done to assure consumers and the public that another incident like this will happen again needs to be made.

7. New Authorization Process

Greg noted the RSN is under a corrective action plan from MHD to develop a new authorization process. A workgroup has come up with a process and policy 1505.00 on authorization for ongoing outpatient services. Greg explained the authorization process and noted the deadline for this to be in process is September 1. Susan asked how this will apply to people entering the system from E&T’s

and WSH. Greg noted people from the E&T already in services are not applicable, but a new person would be sent through the standard or expedited authorization process. Susan noted the need for discharge planning. Diana noted a central issue is if intakes will happen when someone is in the hospital. Greg agreed it will but this is a complicated issue. There is an upcoming meeting on this with some of the jail services programs. Committee discussion followed. Greg noted WSH liaisons work directly with facilities, not with the region's centralized access, who are usually called after the fact. A clear policy is needed.

Deborah asked about someone coming out of a facility with an LR or CR with no previous connection to the system automatically receiving an expedited authorization. Greg noted medical necessity is the factor in deciding if expedited authorization is needed. Susan noted when someone is released from a facility with no services they are in their most vulnerable state. Diana noted guidance is needed from MHD on this issue.

Greg noted QMC approved policy 1505.00 and asked if the committee would approve the policy. A motion was made to approve policy 1505.00, motion seconded. Discussion: Debra noted that as the policy is operationalized there will likely be issues that will come up which will need to be added to the policy. All were in approval. The policy will be recommended to the Board of Directors.

8. Draft Charter QMOC Policy Sub-Committee

Greg noted between the EQRO and the RFQ the RSN has been forced to write a large amount of policies and effort has been made to streamline the process. Policies often need to be amended, and to prevent committees in getting tied up, NSMHA is recommending subcommittees for QMOC, QMC, and ICRS to work on these policies. Greg drew attention to the proposed policy sub-committee charter for QMOC. Gary noted a consumer or advocate should be included in the membership, Greg agreed. Debra asked what the process for workflow is. Start at QMC policy subcommittee, then QMC, then QMOC policy subcommittee, then QMOC, then Board of Directors. If a problem with a policy arises, it will go to Management Council, then to QMOC. Rochelle asked that the language in membership for APN be changed to "Staff" instead of Clinical Director/Quality Manager. Greg noted a flow chart could be added to the NSMHA policy on policy process. Another item will be added to the charter for a chair. The facilitator item will be removed.

A motion was made to accept the charter with changes.

9. Update on Documentation Flow Chart

Debra noted there were some modifications made to flowchart, after differences of interpretation between APN and NSMHA. Debra will sit down with Stacey Alles and Pam Benjamin on the changes to this chart on August 4th, Debra will bring back the revised version to the next QMOC meeting.

10. Date & Agenda for Next Meeting

Gary noted the next date is August 23rd. Greg raised the issue that QMC is not going to meet next month and noted there may not be enough brought forward to hold a QMOC meeting. A motion was made to cancel the August 23rd meeting, motion seconded, all in favor. The next meeting will be held September 27th, 2006.

Debra will contact individuals about attending the QMOC Policy subcommittee. A date was set for Monday September 25th from 3:00 – 4:30 PM. Debra will send out an invitation to all QMOC members.

11. Review of Meeting

Gary noted he would like to get the time of this meeting down from 120 to 90 minutes.

12. Adjourn

The meeting was adjourned at 2:15 p.m.

Respectfully submitted,
Shannon Solar

Please Note:

The attachments referenced herein are part of the official record and attached to the file copy. Please contact the NSMHA at 1-800-684-3555 if you have any questions, comments, or concerns.

Contracting and Funding Redesign Workplan Meeting Scheduling

System Modeling Workgroup

#	Key Tasks	Meeting Length	Date Possibilities	Category
1	Model review and data specifications development including cost study survey	2 hours	Friday, August 11, 1:00 – 3:00 p.m.	Face to face Meeting
	Collect and send data to Dale	N/A	Week of August 14	Homework
2	Review the populated model, address questions and issues	3 hours	Tuesday, Aug. 22, 9:00 a.m. to 12:00 p.m.	Face to face Meeting
3	Address any outstanding issues	2 hours	Thursday, August 31, 9:00 – 11:00 a.m.	Face to face or Web Conference

Clinical Design Workgroup

#	Key Tasks	Meeting Length	Date Possibilities	Category
1	Clinical Design Meeting	3.5 hours	Friday, Sept. 8, 9:00 a.m. to 12:30 p.m.	Face to face Meeting
2	Clinical Design Meeting	3.5 hours	Friday, Sept. 15, 9:00 a.m. to 12:30 p.m.	Face to face Meeting
3	Clinical Design Meeting	3.5 hours	Friday, Sept. 22, 9:00 a.m. to 12:30 p.m.	Face to face Meeting
4	Clinical Design Meeting	3.5 hours	Friday, Sept. 29, 9:00 a.m. to 12:30 p.m.	Face to face Meeting

Financial System Design Workgroup

#	Key Tasks	Meeting Length	Date Possibilities	Category
	Collect cost survey data	N/A	Month of September	Homework
1	Discuss matching payment methods to services, rate setting methodology, cost survey, ramp up options	3.5 hours	Wednesday, October 11, 9:00 a.m. to 12:30 p.m.	Face to face Meeting
2	Continue with previous issues, develop risk management plan	3.0 hours	Thursday, October 19, 9:00 a.m. to 12:00 p.m.	Face to face Meeting
3	Review and finalize Design	2 hours	Monday, October 23, 9:00 to 11:00 a.m.	Face to face Meeting or Web Conference

Contract System Design Workgroup

#	Key Tasks	Meeting Length	Date Possibilities	Category
1	Organize service types into contract groupings, discuss provider qualifications, and review procurement options	4.0 hours	Thursday, October 19, 1:00 to 5:00 p.m.	Face to face Meeting
2	Continue with previous issues, crosswalk contracting approaches to payment methods and develop procurement workplan	3.0 hours	Wednesday, November 1, 2:00 to 5:00 p.m.	Face to face Meeting

Implementation Plan and RFQ Development

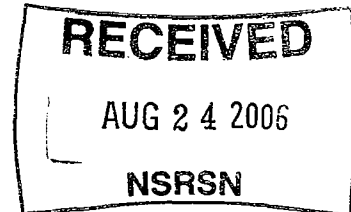
#	Key Tasks	Who	Deadline
1	Pull together NSMHA contract boilerplate	NSMHA contract staff	October 31
2	Put Clinical and Fiscal Designs into RFQ format	NSMHA and MCPP staff	October 31
3	Prepare Implementation Tasks, Resources and Timelines	NSMHA and MCPP staff	October 31
4	Develop RFQ Questions	NSMHA and MCPP staff	November 15
5	Complete 1 st Draft of RFQ	NSMHA and MCPP staff	November 30
6	Finalize RFQ	NSMHA and MCPP staff	December 12



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Mental Health Division • PO Box 45320 • Olympia WA 98504-5320 • (360) 902-8070

August 21, 2006

Chuck Benjamin, Administrator
North Sound Regional Support Network
117 N. 1st Street, Suite #8
Mount Vernon, Washington 98273-2858



Dear Mr. Benjamin:

Thank you for submitting your Level of Care Guidelines to the Mental Health Division (MHD) for approval. The documents you provided have been reviewed and approved for the current contract ending August 31, 2006.

The MHD requests that during the next contract period from September 1, 2006 through July 30, 2007 each RSN reviews its Level of Care Guidelines and practices in the following areas to maintain compliance with the requirements of the contract.

1. Verify that the most current version of the Access to Care Standards is incorporated into the Level of Care Guidelines for both the State Mental Health (SMH) and Pre-paid Inpatient Health Plan (PIHP) contracts. These are dated 01-01-06 and were included with the September 2006 contracts.
2. Verify that the Level of Care Guidelines for the PIHP contract include the requirements for EPSDT, including the review by a Child Specialist and Level 2 assignments under the Access to Care Standards of multi-system children as described in the contract.
3. Verify that a process exists for determining when resources are available for services and how consumers are screened for admission to services under the SMH contract in addition to the Access to Care Standards. This process should be included in a policy and procedure that describes how these decisions are made and requires that these decisions are not made arbitrarily.
4. Verify that the GAF scores reported and used to make eligibility determinations for services under both the SMH and the PIHP contract are well supported in the clinical documentation.

The September 2006 contract does not require the submission of an RSN's Level of Care Guidelines to the MHD on a certain date. Instead the contract requires submission of the Guidelines upon request. At this time, the MHD asks that if an RSN makes changes to their Level of Care Guidelines that the RSN notify the MHD immediately.

Sincerely,

Richard E. Kellogg, Director
Mental Health Division

