



- i. Schedule site visits,
  - ii. Interview program staff chosen by the provider,
  - iii. Review a minimum of 5% of the agency's records for active clients, or 5 records, whichever is smaller.
- d. Main responsibilities are to:
- i. Assist the provider to identify program strengths and challenges.
  - ii. Assess needs and make recommendations for technical assistance and training to improve skills and improve quality and appropriateness of treatment and recovery services.
  - iii. Recommend possible changes in service delivery patterns to improve the quality and appropriateness of treatment and recovery services.
  - iv. Complete a Peer Review report for each program reviewed, in a format provided by DBHR, and within the following timeline:
    - (a) Within 10 days of the site visit, the reviewer sends a draft report to the provider for their review and comments. The provider has 10 days from the receipt of the draft report to return their comments, if any, to the reviewer.
    - (b) Within 10 days of receiving the provider's comments the reviewer completes the final report; and,
    - (c) E-Mails a copy of the final report to the provider and to DBHR with a courtesy copy to the managing Behavioral Health Organization.
    - (d) Provide suggestions and recommendations regarding the effectiveness of the Peer Review program and modifications to program tools, training and procedures.

## **5. Organizational Roles and Responsibilities:**

- a. The MHBG Community Mental Health Agency:
  - i. Coordinates with the peer reviewers to schedule the site visit. Each review is usually no less than four hours but no more than six.
  - ii. Selects one or two key staff to participate in the site visit interviews.
  - iii. Shares copies of brochures and community educational materials distributed by the agency with peer reviewers.
  - iv. Randomly selects and arranges five or 5% of patient records from the caseload of currently active clients for peer review purpose only.
  - v. Completes a peer review process evaluation form.
  - vi. Within 10 days, reviews and comments on the draft peer review report of their program.
  - vii. Each program review becomes part of the recommendations presented by the Behavioral Health Advisory Council (BHAC) to DBHR Director for consideration in behavioral health strategic planning.
- b. The Behavioral Health Advisory Council (BHAC):
  - i. Oversees the peer review process in Washington State.
  - ii. Reviews a compilation of summary reports from the Peer Reviewers.
  - iii. Merges the individual reports into a document that summarizes:

- (a) Program characteristics.
  - (b) Program strengths.
  - (c) Program challenges.
  - (d) Reviewers' recommendations.
  - (e) Requests or suggestions for technical assistance and training.
- iv. Submits a final report, with recommendations, to the Director of the Division of Behavioral Health and Recovery.
- c. The Division of Behavioral Health and Recovery (DBHR):
- i. DBHR supports BHAC and their role in overseeing the Peer Review Program by:
    - (a) Incorporating a clause in the contract of all programs receiving federal block grant funding that explains the provider's responsibility to participate in the Peer Review process.
    - (b) Mailing the annual peer review recruitment letters to all certified MHBG mental health agencies and professional organizations.
    - (c) Providing staff support to the BHAC to arrange meetings, provide written materials.
    - (d) Providing an orientation and training to Peer Reviewers, prior to making site visits. Trainings are, approximately four hours long. The training is designed to bring consistency to the peer review process and will include information regarding:
      - Training tools, forms, and support services that may be available to the provider;
      - (A) Scheduling the site visit;
      - (B) Structuring/organizing the peer review day;
      - (C) Using the peer review forms and information gathering tools;
      - (D) Maintaining confidentiality of patient and provider information;
      - (E) Writing the individual peer review reports;
      - (F) Making travel arrangements and completing the reimbursement forms; and,
      - (G) Meeting reporting deadlines.
  - ii. For each annual Peer Review process, DBHR maintains records of the following:
    - (a) A listing of the providers reviewed and the dates of the peer review site-visits.
    - (b) A listing of the peer reviewers.
    - (c) A copy of summary peer review reports.
    - (d) A copy of the summary recommendations to the Director of the Division of Behavioral Health and Recovery.
  - iii. After each review period, DBHR will:
    - (a) Make appropriate changes to forms used during the Peer Review program in response to recommendations from peer reviewers and providers.
    - (b) Provide up to 32 CEUs to each peer reviewer. CEUs are determined based on number of hours spent conducting a review.
    - (c) Send to each participating provider a copy of the recommendations document presented to DBHR's Director.