

QUALITY IMPROVEMENT WORK PLAN CY 2011

I. MONITORING SERVICE DELIVERY CAPACITY

1. a. The Penetration Rate for Latinos below the 200% Federal Poverty Level (FPL) will be maintained at 45%.
- b. The Retention Rate for Latinos will be maintained at 44.6% for 5-15 services and at 52% for 16 or more services.
- c. The Penetration Rate for Asian/Pacific Islanders below the 200% Federal Poverty Level (FPL) will be increased by 0.2% from 28.3% to 28.5%.
- d. The Retention Rate for Asian/Pacific Islanders (API) will be maintained at 4.3% for 5-15 services and at 4.7% for 16 or more services.
2. The Cultural Competency Unit, the Cultural Competency Committee, the Quality Improvement Council, and the Service Area Quality Improvement Committees will collaboratively identify and select strategies and interventions to improve the API Penetration Rate (for the Population at or below 200% poverty) which has decreased by 3.2% between 2007 and 2010.

II. MONITORING ACCESSIBILITY OF SERVICES

1. Maintain access to after-hours care at 69% of PMRT response time of one hour between PMRT acknowledgements of the call to PMRT arrival on the scene and continue year to year trending.
2. Maintain the rate of abandoned calls (responsiveness of the 24-hour toll free number) at an overall annual rate of 15%.
3. Increase the overall rate by 1% from 88.7% in CY 2010 to 89.7% in CY 2011 for consumers/families reporting that they are able to receive services at convenient locations and continue year to year trending. [Source: Performance Outcomes].
4. Increase the overall rate by 1% from 90.7% in CY 2010 to 91.7% in CY 2011 for consumer/families reporting that they are able to receive services at convenient times and continue year to year trending. [Source: Performance Outcomes].

III. MONITORING BENEFICIARY SATISFACTION

1. Continue to participate with CDMH new survey methodology (once a year) for the Statewide Performance Outcomes, determine improved survey sampling methodology, and continue year to year trending.
2. Increase by 1% from 90% in CY 2010 to 91% in CY 2011 consumers/families reporting that staff were sensitive to cultural/ethnic background [Source: Performance Outcomes].
3. Increase by 1% from 84.4% in CY 2010 to 85.4% in CY 2011 the Overall Satisfaction Percentage Score and initiate year to year trending. [Source: Performance Outcomes]
4. Maintain at 94% consumers/families reporting that written materials are available in their preferred language and continue year to year trending.
5. Continue to identify areas for improvement for Service Area QICs for use in quality improvement activities, and increase Service Area Quality Improvement Projects from 2 to 4.
6. Continue to Monitor and improve beneficiary grievances, appeals and State Fair Hearings processes, including instituting new electronic system and annual reporting for policy changes.
7. Continue to improve responsiveness to Beneficiary Requests for Change of Provider. Continue to monitor reports on the reasons given by consumers for their change of provider request and integrate measures into the new electronic system.

IV. MONITORING CLINICAL CARE

1. Continue to improve medication practices through systematic use of medication protocols and trainings for the use of medication forms and clinical documentation for existing staff and for new staff.
2. Continue EPSDT Performance Improvement Project (PIP) to ensure that each consumer receives services that are appropriate, effective and efficient.

V. MONITORING CONTINUITY OF CARE

1. Consumers will receive continuity of care by being seen within 7 calendar days of discharge from an acute psychiatric hospital (Post Hospitalization Outpatient Access – PHOA) and continue RC2 PIP in collaboration with APS/EQRO and Statewide consultants.

VI. MONITORING OF PROVIDER APPEALS

1. Continue monitoring the rate of zero appeals through CY 2011.