

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH

QI WORK PLAN GOALS FOR 2014

PROGRAM SUPPORT BUREAU - QUALITY IMPROVEMENT DIVISION

DOMAIN I: MONITORING SERVICE DELIVERY CAPACITY

GOAL 1: 49% of Latinos estimated with SED and SMI at or below the 138% Federal Poverty Level (FPL) will be served in LACDMH Short Doyle/Medi-Cal (SD/MC) facilities in FY 13-14.

Population: Latino population estimated with SED and SMI and living at or below 138% FPL.

Indicator: Latino consumers receiving outpatient services in SD/MC facilities.

Measure: Unduplicated number of Latino consumers served in LACDMH SD/MC outpatient facilities / By Latino population estimated with SED and SMI at or below 138% FPL multiplied by 100.

Source(s) of Information:

1. Prevalence: California Health Interview Survey (CHIS)
2. Consumers Served: LACDMH Integrated System (IS)
3. Population Estimates: American Community Survey (ACS), U.S. Census Bureau

Responsible Entity:

QI Division, Data GIS Unit

**COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
PROGRAM SUPPORT BUREAU - QUALITY IMPROVEMENT DIVISION**

QI WORK PLAN GOALS FOR 2014

DOMAIN I: MONITORING SERVICE DELIVERY CAPACITY

GOAL 2: 47% of Asian Pacific Islanders (API) estimated with SED and SMI at or below the 138% Federal Poverty Level (FPL) will be served in LACDMH Short Doyle/Medi-Cal (SD/MC) facilities in FY 13-14.

Population: API population estimated with SED and SMI at or below 138% FPL.

Indicator: API consumers receiving outpatient services in SD/MC facilities.

Measure: Unduplicated number of API persons served in SD/MC outpatient facilities / By API population estimated with SED and SMI at or below 138% FPL multiplied by 100.

Source(s) of Information:

1. Prevalence: California Health Interview Survey (CHIS)
2. Consumers Served: LACDMH Integrated System (IS)
3. Population Estimates: American Community Survey (ACS), U.S. Census Bureau

Responsible Entity: QI Division, Data-GIS Unit

**COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
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DOMAIN I: MONITORING SERVICE DELIVERY CAPACITY

GOAL 3: Increase the number of consumers receiving mental health services through tele-psychiatry appointments by 50% in Calendar Year 2014 compared to Calendar Year 2013.

Population: Consumers receiving mental health services through tele-psychiatry at various end points in Directly Operated Clinics of the Department of Mental Health.

Indicator: Service delivery capacity for psychiatry appointments via tele-psychiatry.

Measure: The percentage increase in the number of consumers receiving mental health services through tele-psychiatry appointments in Calendar Year 2014 compared to Calendar Year 2013.

Source(s) of Information/: LACDMH IS approved claims data

Responsible Entity: OMD, QI Division, Data-GIS Unit

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DOMAIN II: MONITORING ACCESSIBILITY OF SERVICES

GOAL 1: Maintain the percentage of after-hour PMRT responses with a response time of one hour or less at 72%.

Population: Consumers receiving urgent after-hour care from Psychiatric Mobile Response Teams (PMRT) of the LAC-DMH Emergency Outreach Bureau (EOB).

Indicator: Timeliness of after-hour care.

Measure: The number of after-hour PMRT responses with response times of one hour or less / the total number of after-hour PMRT responses for the Calendar Year 2014 multiplied by 100.

Source(s) of Information: LACDMH ACCESS Center Data

Responsible Entity: EOB, ACCESS Center, QI Division

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DOMAIN II: MONITORING ACCESSIBILITY OF SERVICES

GOAL 2: Seventy five percent of calls to the toll free hotline are answered by a live agent within a minute from when they present to the Virtual Call Center (VCC) of the toll free hotline.

Population: Callers using the ACCESS 24/7 Toll Free number:
1-800-854-7771.

Indicator: Responsiveness of the MHP's toll free hotline.

Measure: The number of calls for the Calendar Year 2014 that are answered within one minute from when they present to the Virtual Call Center (VCC) / the total number of calls extended to the VCC for the Calendar Year 2014 multiplied by 100.

Source(s) of
Information: LACDMH ACCESS Center

Responsible
Entity: ACCESS Center, QI Division

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DOMAIN II: MONITORING ACCESSIBILITY OF SERVICES

GOAL 3: Maintain percent of completed test calls to the toll free hotline at 95% in CY 2014.

Population: Callers using the 24/7 Toll Free number: 1-800-854-7771.

Indicator: Percent of Test Calls completed.

Measure: Number of test calls completed / total number of test calls multiplied by 100.

Source(s) of Information: SA QIC Test Call Study Findings.

Responsible Entity: ACCESS Center, SA QICs, QI Division, Data-GIS Unit

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DOMAIN II: MONITORING ACCESSIBILITY OF SERVICES

GOAL 4: Maintain the percent of consumers/families reporting that they are able to receive services at convenient locations at 85.7% in CY 2014.

Population: Consumers served in SD / MC Outpatient and Day Treatment Facilities

Indicator: Convenience of service locations.

Measure: The number of consumers/family members that agree or strongly agree on the MHSIP survey that they are able to receive services at convenient locations / By the total number of consumers/family members that completed the survey during the survey period multiplied by 100.

Source(s) of Information: Mental Health Statistics Improvement Program (MHSIP)
Consumer Survey-State Performance Outcomes

Responsible Entity: QI Division, Data-GIS Unit, LACDMH Outpatient and Day treatment Providers

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DOMAIN II: MONITORING ACCESSIBILITY OF SERVICES

GOAL 5: Maintain the percent of consumers/families reporting that they are able to receive services at convenient times at 91.0% in CY 2014.

Population: Outpatient Clinic and Day Treatment Program consumers/families.

Indicator: Convenience of appointment times.

Measure: The number of consumers/family members that agree or strongly agree on the MHSIP survey that they are able to receive services at convenient times / By the total number of consumers/family members that completed the survey during the survey period multiplied by 100.

Source(s) of Information: Mental Health Statistics Improvement Program (MHSIP)
Consumer Survey-State Performance Outcomes

Responsible Entity: QI Division, Data-GIS Unit, LACDMH Outpatient and Day treatment Providers

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DOMAIN II: MONITORING ACCESSIBILITY OF SERVICES

GOAL 6: 100 clergy who serve underserved populations (Latino & Asian) will have received at least 5 of the courses of the Clergy Academy curriculum by Dec. 31, 2014.

Population: Underserved Latino and Asian populations.

Indicator: Collaboration of LACDMH with faith based communities to reduce disparities for the underserved populations with mental health needs.

Measure: Number of clergy trained in the Clergy Academy at LACDMH to expand their knowledge in mental health issues and enhance outreach and engagement of the underserved populations they serve – Latino and Asian.

Source(s) of Information: Office of the Director, Community and Government Relations - Spirituality Initiative

Responsible Entity: Office of the Director, Community and Government Relations – Spirituality Initiative, QI Division

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QI WORK PLAN GOALS FOR 2014

DOMAIN III: MONITORING BENEFICIARY SATISFACTION

GOAL 1: Maintain the percent of consumers/families reporting that staff was sensitive to their cultural/ethnic background at 89% in CY 2014.

Population: Outpatient Clinic and Day Treatment Program consumers/families.

Indicator: Sensitivity to cultural/ethnic background.

Measure: The number of consumers/family members that agree or strongly agree that staff was sensitive to cultural/ethnic background / By the total number of consumers/family members that completed the survey during the survey period multiplied by 100.

Source(s) of Information: Mental Health Statistics Improvement Program (MHSIP)
Consumer Survey-State Performance Outcomes

Responsible Entity: QI Division, Data-GIS Unit, LACDMH Outpatient and Day treatment Providers

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QI WORK PLAN GOALS FOR 2014

DOMAIN III: MONITORING BENEFICIARY SATISFACTION

GOAL 2: Maintain the percent of all age group consumers/families reporting overall satisfaction with services provided at 83% in CY 2014 and continue year to year trending of the data.

Population: Outpatient Clinic and Day Treatment Program consumers/families.

Indicator: Overall satisfaction with services provided.

Measure: The number of consumers/family member that agree or strongly agree they are satisfied overall with the services they have received/ By the total number of consumers/family member that completed the survey during the survey period multiplied by 100.

Source(s) of Information: Mental Health Statistics Improvement Program (MHSIP) Consumer Survey

Responsible Entity: QI Division, Data-GIS Unit, LACDMH Outpatient and Day treatment Providers

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QI WORK PLAN GOALS FOR 2014

DOMAIN III: MONITORING BENEFICIARY SATISFACTION

GOAL 3: Monitor the grievances, appeals and requests for State Fair Hearings for FY 2013-2014.

Resolve all standard appeals within 45 days of receipt of appeal by Patients' Rights Office. Resolve all grievances within 60 calendar days from the date the grievance was logged on the Problem Resolution Log.

Population: Consumers/family members served by LACDMH.

Indicator: Beneficiary grievances, appeals, and requested State Fair Hearings.

Measure: Number and type of the beneficiary grievances, appeals, and State Fair Hearings resolved and referred out, and pending for FY 2013-2014.

Source(s) of Information: Patients' Rights Office (PRO) Reports

Responsible Entity: Patients' Rights Office (PRO), QI Division, Data-GIS Unit

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DOMAIN III: MONITORING BENEFICIARY SATISFACTION

GOAL 4: Monitor Beneficiary Requests for Change of Provider including reasons given by consumers for their change of provider requests.

Maintain a rate of 94 percent of providers reporting the requests for change of provider for the CY 2014.

Population: Consumers and their family members in the County of Los Angeles.

Indicator: Number and type of Requests for Change of Provider.

Measure: Number of providers reporting their requests for change of provider / By the number of providers required to report their requests for change of provider to PRO multiplied by 100.

Source(s) of Information: Patients' Rights Office (PRO) Reports

Responsible Entity: Patients' Rights Office (PRO), QI Division, Data-GIS Unit

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QI WORK PLAN GOALS FOR 2014

DOMAIN IV: MONITORING CLINICAL CARE

GOAL 1: Continue to improve medication practices through systematic use of medication parameters, medication peer review, and trainings for the use of medication.

Population: Consumers receiving medication support services.

Indicator: Prescribing standards and parameters.

Measure: Review and update of medication parameters, medication-related trainings, and reports of psychiatric peer review.

Source(s) of Information: Office of the Medical Director (OMD) Reports

Responsible Entity: Office of the Medical Director (OMD), QI Division

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DOMAIN V: MONITORING THE CONTINUITY OF CARE

GOAL 1: 10% of clients enrolled in the FSP pilot integration project will transition to a lower level of care in Calendar Year 2014.

Population: Consumers who enrolled into the FSP Pilot Integration Project and received services for the Calendar Year 2014.

Indicator: Client flow from higher to lower levels of care.

Measure: The number of clients served in the FSP Pilot Integration Project who transitioned into a lower level of care in CY 2014 / By the total number of clients served in the FSP Pilot Integration Project in CY 2014 multiplied by 100.

Source(s) of Information: LAC-DMH MHSA Implementation and Outcomes Division

Responsible Entity: LAC-DMH MHSA Implementation and Outcomes Division, QI Division

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QI WORK PLAN GOALS FOR 2014

DOMAIN VI: MONITORING PROVIDER APPEALS

GOAL 1: The MHP will respond in writing to 100% of all appeals from providers within 60 calendar days from the date of receipt of the appeal.

Population: Contracted Providers.

Indicator: Timeliness of the MHP's written response to Provider Appeals.

Measure: Number of MHP's responses to Provider Appeals (day treatment, inpatient, and outpatient) within 60 calendar days for Calendar Year 2014 / By the total number of provider appeals for Calendar Year 2014 multiplied by 100.

Source(s) of Information: LACDMH Managed Care Division and Provider Support Organization (PSO)

Responsible Entity: Managed Care Division, PSO, QI Division

QUALITY IMPROVEMENT WORK PLAN CY 2014

I. MONITORING SERVICE DELIVERY CAPACITY

1. *49% of Latinos estimated with SED and SMI at or below the 138% Federal Poverty Level (FPL) will be served in LACDMH Short Doyle/Medi-Cal (SD/MC) facilities in FY 13-14.*
2. *47% of Asian Pacific Islanders (API) estimated with SED and SMI at or below the 138% Federal Poverty Level (FPL) will be served in LACDMH Short Doyle/Medi-Cal (SD/MC) facilities in FY 13-14.*
3. *Increase the number of consumers receiving mental health services through tele-psychiatry appointments by 50% in Calendar Year 2014 compared to Calendar Year 2013.*

II. MONITORING ACCESSIBILITY OF SERVICES

1. *Maintain the percentage of after-hour PMRT responses with a response time of one hour or less at 72%.*
2. *Seventy five percent of calls to the toll free hotline are answered by a live agent within a minute from when they present to the Virtual Call Center (VCC) of the toll free hotline.*
3. *Maintain percent of completed test calls to the toll free hotline at 95% in CY 2014.*
4. *Maintain the percent of consumers/families reporting that they are able to receive services at convenient locations at 85.7% in CY 2014.*
5. *Maintain the percent of consumers/families reporting that they are able to receive services at convenient times at 91.0% in CY 2014.*
6. *100 clergy who serve underserved populations (Latino & Asian) will have received at least 5 of the courses of the Clergy Academy curriculum by Dec. 31, 2014.*

III. MONITORING BENEFICIARY SATISFACTION

1. *Maintain the percent of consumers/families reporting that staff was sensitive to their cultural/ethnic background at 89% in CY 2014.*
2. *Maintain the percent of all age group consumers/families reporting overall satisfaction with services provided at 83% in CY 2014 and continue year to year trending of the data.*
3. *Monitor the grievances, appeals and requests for State Fair Hearings for FY 2013-2014. Resolve all standard appeals within 45 days of receipt of appeal by Patients' Rights Office. Resolve all grievances within 60 calendar days from the date the grievance was logged on the Problem Resolution Log.*
4. *Monitor Beneficiary Requests for Change of Provider including reasons given by consumers for their change of provider requests. Maintain a rate of 94 percent of providers reporting the requests for change of provider for the CY 2014.*

IV. MONITORING CLINICAL CARE

1. *Continue to improve medication practices through systematic use of medication parameters, medication peer review, and trainings for the use of medication.*

V. MONITORING CONTINUITY OF CARE

1. *10% of clients enrolled in the FSP pilot integration project will transition to a lower level of care in Calendar Year 2014.*

VI. MONITORING OF PROVIDER APPEALS

1. *The MHP will respond in writing to 100% of all appeals from providers within 60 calendar days from the date of receipt of the appeal.*