County of Los Angeles - Department of Mental Health

Quality Improvement Work Plan Implementation Status Report
Dated October 17, 2013
Prepared by: Program Support Bureau, Quality Improvement Division

NAME OF REPORT:

MEDICATION SUPPORT SERVICES

QI IMPLEMENTATION STATUS REPORT

During 2013, the MHP reviewed and revised a number of County of Los Angeles Department of Mental Health Policies and Parameters regarding medications. Policy 103.06, Indigent Medications Program, was updated May 14, 2013 and specifies procedures to obtain prescribed medications for eligible indigent and low income clients who receive services at directly operated LACDMH programs at no cost from pharmaceutical company foundations. Parameters 2.7, Assessment of Co-occurring Mental Health Disorders & Cognitive Impairment were revised on May 29, 2013. These parameters apply to those at risk for co-occurring cognitive impairment specifying signs and symptoms that prompt a formal assessment of cognitive functioning. The parameter outlines cognitive functioning assessment procedures. Parameters 3.8, Use of Psychotropic Medications in Children and Adolescents, were issued on June 19, 2013, replacing former guidelines on this topic. Parameters 3.9, For Juvenile Court Mental Health Services' (JCMHS') Review of Psychotropic Medication Application Forms (PMAFS) for Youth in State Custody were established on May 1, 2013. These parameters define general categories of findings and specify fact patterns which trigger a categorical finding and recommendation. Parameters 3.10, For the Use of Medication Assisted Treatment in Individuals with Co-occurring Substance Use Disorders were established in October 2013 and describe those situations where medication assisted treatment (MAT) should be used to treat co-occurring substance use disorders in DMH Programs.

The Office of the Medical Director concluded the Peer Review of indigent clients prescribed 5 or more concurrent psychotropic medications from twenty-two (22) directly operated Mental Health Centers monitoring compliance with existing DMH parameters and policies. Any noncompliance requires appropriate documentation. A report summarizing the findings dated May 7, 2013 has been prepared and was presented to the Departmental Quality Improvement Council on May 13, 2013. All departures and discrepancies have been addressed.

During 2013 the Office of the Medical Director hired a new Regional Medical Director, Dr. Karen Lee.

Summary of Findings

In order to facilitate implementation of the newly revised Policies and Parameters, all have been distributed and posted to the LAC-DMH website for easy access and reference.

Action Requested/Needed

1. LAC-DMH shall regularly measure performance against important components of the DMH clinical parameters. Monitoring and analysis is used to improve practitioner performance, revise the guidelines, and enhance clinical decision-making.

2. All parameters related to the use of psychoactive medications shall be incorporated into existing medication monitoring standards and procedures.

3. Existing methods of monitoring and quality improvement will be utilized where appropriate. These methods include, but are not limited to, supervision, medication monitoring, peer review, and site visits.