

Hancock County Board of Alcohol, Drug Addiction & Mental Health Services	Board Policy Section: III – Client Issues/ Quality Monitoring
Subject: Quality Improvement Plan Original Adoption Date: November 16, 2006 Latest Board Approved Revision: November 16, 2006	Revision Date(s):

Policy:

The Board shall maintain and implement a quality improvement plan and ensure the results are reported to Board members on a regular basis. Such plan shall be in compliance with any codified responsibilities from the Ohio Department of Mental Health and the Ohio Department of Alcohol and Drug Addiction Services. The purpose of the Board's Quality Improvement Plan is to integrate information from a variety of sources to raise the quality of the county's system of behavioral health care. Continuous quality improvement is the mechanism by which this integration occurs to monitor system goals and strengthen system processes.

Procedure:

1. Foundational Background

A. Codified Responsibilities

The Ohio Department of Alcohol and Drug Addiction Services (ODADAS) and the Ohio Department of Mental Health (ODMH), as part of a system-wide approach to quality improvement, require certified providers to establish Quality Improvement programs. ODADAS has issued actual program certification standards (OAC §3793:2-1-04, titled Quality Assurance and Improvement Rule). ODMH includes rules related to the type of process an agency shall employ (OAC §5122-28-03, titled Performance Improvement Rule).

While ODMH has no certification rules addressing Board level Continuous Quality Improvement processes (CQI), ODADAS provides a detailed description of a Board's Quality Improvement program in its ODADAS Guidance Manual.

B. Implementation Values

Given the various quality improvement rules, processes, and projects, the Hancock County Alcohol, Drug Addiction and Mental Health Services Board shall implement a Quality Improvement Plan that will:

1. Meet ODADAS/ODMH and other applicable requirements, laws and rules.
2. Be relevant by being shaped by current behavioral health trends and research.
3. Strive to be data driven and include information meaningful to families and consumers.
4. Be simple to implement and monitor by using measurable targets, comparative information, and existing databases where possible.

To follow these implementation values, the Board shall demonstrate the commitment to provide the financial resources necessary to support training, activities, equipment and personnel required in developing, managing and evaluating a system-wide quality improvement program.

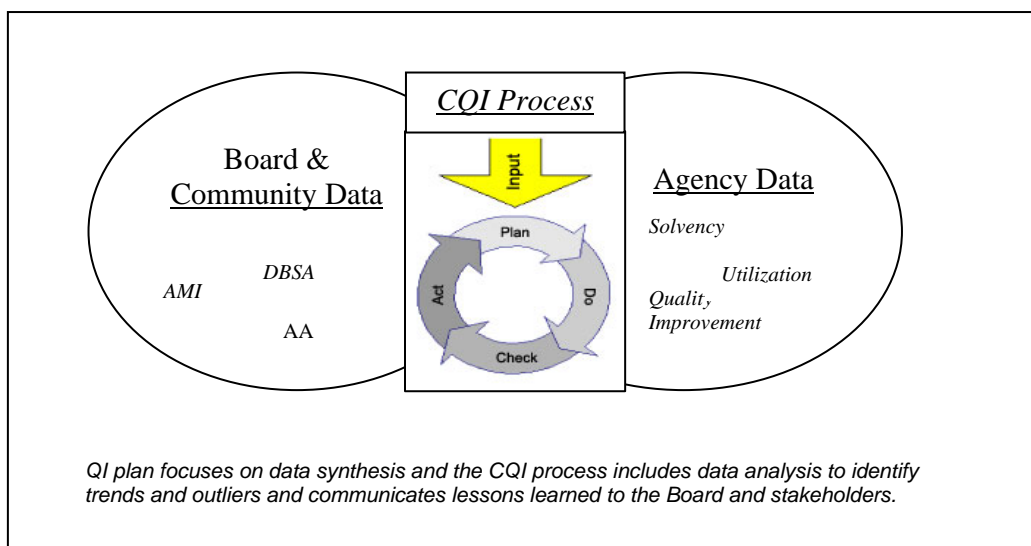
2. Purpose of the Quality Improvement Plan

Throughout this Policy, Quality Improvement Plan (QIP) refers to this written Plan developed by the Board and Continuous Quality Improvement (CQI) is the processes used to review and react to relevant information. CQI seeks to understand processes and revise them on the basis of data. CQI sees “problems” as opportunities for improvement and involves a project-by-project or step-by-step approach to systematically improve quality.

The Board shall assure that all contracted agencies’ Quality Improvement Plans are congruent with the Board’s Plan. This shall be accomplished through annual reviews of agency and Board Quality Improvement Plans. The Board’s Plan, however, is different from agency level QI Plan, as the Board monitors quality for the entire system of care and includes data from multiple sources.

A CQI process can provide a framework in which customers can give systematic feedback about the planning, development, implementation and evaluation of clinical care and other services whether through formal mechanisms (like the Alliance on Mental Illness, Depression Bipolar Support Alliance), or informal relationships (e.g., the AA community, client calls to the Board).

CQI Process Illustration



The purpose of the Board’s Quality Improvement Plan is to integrate information from all of these sources to raise the quality of the county’s system of behavioral health care. Continuous quality improvement will be the mechanism by which this integration occurs to monitor system goals and strengthen system processes.

3. Quality Improvement Goals and Objectives

Goals: 1) Establish and maintain a flexible, comprehensive and integrated quality improvement program; 2) Promote quality improvement as an integral and dynamic component of Board, agency, consumer and community activities.

Objectives:

1. To coordinate and communicate quality improvement activities to the Board in order to provide information and/or recommend action by the Board.
2. To foster and facilitate communication/action of Board quality improvement activities to agencies, consumers, family members and the lay public.
3. To provide oversight and accountability for monitoring quality improvement activities of agencies, services and programs to ensure timely reporting and corrective action, when indicated.
4. To identify opportunities for developing new services based upon the needs of consumers, strengthening current delivery systems and identifying and correcting problems that impede satisfactory service delivery to consumers.
5. To ensure compliance with all state, federal or other applicable requirements and/or regulations.
6. To identify utilization trends and recommend changes to ensure that consumers receive the most appropriate services in the least restrictive environment within their local communities.
7. To ensure a planned, coordinated, integrated and systematic mechanism for monitoring and evaluating the quality and utilization of services and care provided to consumers, families and the lay public.
8. To ensure that agencies, consumers, families and the public have opportunities for information input and feedback to the Alcohol, Drug Addiction and Mental Health Services Board.

4. Approach and Structure of the Board's Quality Improvement Process

The Board level CQI Plan includes the process by which the Board will synthesize and analyze data, as well as selecting what data will be regularly prioritized and reviewed as identified in Board-agency contracts and the Board's Standards Manual.

The Board's Program Committee acts as the oversight body for Board initiated quality improvement activities; however each Committee of the Board shall have responsibilities related to quality improvement. Such responsibilities are outlined in attachment #1.

Staff will implement and monitor the Plan as directed by the Executive Director. Board staff shall ensure that the CQI process is designed to enhance collaboration, cooperation, and communication among, consumers, family members, Board providers, and the Board.

Board staff shall be responsible for monitoring and implementing the system-wide quality improvement program in conjunction with the Board's Committees. Regular reporting on these activities are prepared by Board staff and provided to the Board through its Committees.

The Program Committee shall review and direct staff to act upon findings of quality improvement activities, and will provide feedback to the full Board on the status of CQI activities. Staff will coordinate the communication of these activities with agencies, clients, stakeholders, and/or the

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public, where applicable and periodic reports will be provided to the Board/stakeholders as needed.

Providers are responsible for sending quarterly reports of Quality Improvement activities to the Board. Board and provider level Quality Improvement activities will be summarized by Board staff and reviewed by the Board's Committees as needed. The Board also collaborates with its providers to determine services that could benefit from a focus review. The provider, Board staff, or Program Committee can identify the need for this type of review.

It is the policy of the Board that the confidentiality of information received and reported through the QI process is guided by state and federal laws and professional ethics.