

MENTAL HEALTH SERVICES

Updates

New Changes to Behavioral Health Assessment:

The BHA will have changes and new questions regarding sex and gender – these changes will “go live” in CCBH effective **9/15/21**.

- Change were made to the A/OA BHA, Walk-In BHA, ESU BHA, CSU BHA and Child/Adolescent BHA
- New questions for Pronouns (with Help Text), Preferred Name, Gender Identity, and Legal Sex
- Changes to Current Gender and Sexual Orientation will now accept only one answer rather than multiple responses

OPOH Updates

Section H: revised to replace reference(s) to “BHETA” with “RHIS”.

Update: The following documents from the BHS Quality Improvement 8th Annual Mental Health Providers Forum are now available on the Optum Website, in the MHP Documents, under the References Tab:

- BHS Quality Improvement 8th Annual Mental Health Providers Knowledge Forum Presentation Handout
- BHS Quality Improvement 8th Annual Mental Health Providers Knowledge Forum Question/Answer Sheet

Knowledge Sharing:

STRTP Client Plan Signatures

STRTP regulations require the client plan is signed by both the client and the caregiver/legal representative. For those clients who are dependents of the court, the STRTP should contact the Protective Services Worker (PSW) to identify who the court has appointed as the legal representative. The legal representative will sign the client plan in the place of the parent/caregiver. The client plan should then be shared with the PSW. For clients who are 12 years of age or older, they can be the sole signatory of the client plan as per Family Code 6924(b) which indicates the following:

*A minor who is 12 years of age or older may consent to mental health treatment or counseling on an outpatient basis, or to residential shelter services, if **both** of the following requirements are satisfied:*

- *The minor, in the opinion of the attending professional person, is mature enough to participate intelligently in the outpatient services or residential shelter services.*
- *The minor (A) would present a danger of serious physical or mental harm to self or to others without the mental health treatment or counseling or residential shelter services, or (B) is the alleged victim of incest or child abuse.*

Optum Website Updates MHP Provider Documents

OPOH Tab:

- **Section H:** replaced reference(s) to BHETA with RHIS.

Beneficiary Tab:

- Notice of Privacy Practice Acknowledgement forms updated in all 6 threshold languages.
- Quick Guide to MHP updated in all 6 threshold languages.
- Advanced Directive updated in all 6 threshold languages
- MHP Beneficiary Handbook – Spanish updated

References Tab:

- BHS Quality Improvement 8th Annual Mental Health Providers Knowledge Forum Presentation Handout
- BHS Quality Improvement 8th Annual Mental Health Providers Knowledge Forum Question/Answer Sheet

STRTP Transition Determination Plan

The STRTP Transition Determination Plan (TDP) form requires that it is developed, completed and signed by a member of the STRTP mental health program staff. It is **not** required to obtain the signature of the caregiver/guardian/conservator, but a copy of the TDP shall be provided prior to or at the time of transition, to the following, as applicable: parent, guardian, conservator, or person identified by the court to participate in the decision to place the youth in the STRTP. TDP form fill, explanation sheet, signature page, and CCBH assessment have been updated to reflect this change.

Adult Mental Health Service Providers:

All adult/older adult CSS programs are required to do the MORS on all clients every six months. Case management programs are required to also do the LOCUS (LOCUS is optional for other programs. Check with your COR if you are not sure.) For greatest accuracy, the LOCUS Level of Care Decision Tree from the LOCUS manual should be employed. For the MORS, note that there is a low requirement for "Engagement" in that it only requires that they are voluntarily participating and cooperating with ongoing mental health treatment, regardless of whether they are making progress. Both measures make great tools for team meetings to provide a common language of people's level of need, though no person can be reduced to a number and teams should always look at the whole picture in treatment planning.

For more resources, please see the following resources:

LOCUS Manual:

https://mhoms.ucsd.edu/documents/help/LOCUS_manual.pdf

AOA Outcomes Measures Manual:

[https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/bhs/TRL/TRL%20Section%202/Outcome_Measures_Manual_San_Diego_CSS_Programs_2020%20%20\(updated\).pdf](https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/bhs/TRL/TRL%20Section%202/Outcome_Measures_Manual_San_Diego_CSS_Programs_2020%20%20(updated).pdf)

Reminder! 10-Day NOABD Notice Timeframe

When terminating, suspending, or reducing previously authorized specialty mental health services, the NOABD must be issued **at least 10 days** before the date of action. Discharges should not be completed prior to the 10-day notification requirement. (*ref: OPOH, Section F Beneficiary Rights, Grievance & Appeals, pg. F.8 -9*).

Reminder! Warm Hand offs for Coordination of Care

Coordination of Care between service providers is essential for a client's continuity of care and for our mental health system to work efficiently. As a client may move between different levels of care, it is vital that service providers complete a warm hand off with each other to provide continuity of care for the client. (*Ref: OPOH Sec D: Providing Specialty Mental Health Services, pg. D.1*) Completing a warm hand off is **necessary** and should be documented in the client's EHR or hybrid chart.

COVID Safety Protocols During BHS Site Visits

CDPH indicates that public health facilities continue to require that masks are worn indoors, regardless of vaccination status. Additionally, per State mandate, all County employees are required to provide proof of vaccinations or submit to regular testing and wear a face covering which went into effect August 23, 2021.

QM staff are committed to taking the steps necessary to protect our SOC providers and community's health and adhere to mask protocols and social distancing while engaged in on-site visits and/or medical record reviews, as well as compliance with vaccination verification/testing mandates.

Providers are encouraged to reach out to their assigned QI Specialist and/or QI Leadership prior to your scheduled site visit with any concerns or questions regarding safety protocols.

QI Matters Frequently Asked Questions:

Q: Since many providers are working from home (remotely), when we visit a client's home, how should we claim our travel time?

A: Round trip travel time to/from a staff member's home is allowable. Below are various scenarios regarding how to claim travel time. Further clarification can be found in the Travel Guidelines 2.1.18 on the Optum Website, in MHP Documents under the References tab.

- Travel time may be claimed when starting or ending the workday at home. In order to claim, the time must be the same or less than normal travel time from office to client's location.
 - Clinician claims travel time from their home in Clairemont to client's home in Escondido, then claims travel time to the office in Mission Valley after the service. (This is acceptable because Clairemont is closer to the client's home in Escondido than the office in Mission Valley).
 - Clinician travels from home in Chula Vista to client's location in Fallbrook to start the day. Office is in Mission Valley. When traveling from clinician's home to client's location, if the distance is **farther** than office to client's location, clinician may only claim the standard travel time from the office to client's location. For example: clinician home to client location is 50 minutes, but office to client's location is 30 minutes, then clinician can only claim 30 minutes travel time.
 - Documentation Example: "Clinician traveled from home in Chula Vista to client's location in Fallbrook, but travel time only includes standard travel time from office in Mission Valley to client's location."

Management Information Systems (MIS)

Reminder: ARF Training: Wednesday, September 15, 2021 from 8:00a – 12:00p. Program Managers and/or Admin Staff who would like to take this training, please contact MIS at MISHelpDesk.hhsa@sdcounty.ca.gov

MIS Questions?

MIS has an email for you to send all questions regarding your CCBH accounts.

MIS manages all things related to the system, including authorizations for all trainings/skills assessments/reactivations, account management. Our email is: MISHelpDesk.HHSA@sdcounty.ca.gov

Cerner Reminder

For questions regarding Cerner products or functions, please call or email the Optum Support Desk at 800-834-3792 or email SDHelpdesk@optum.com. Please do not call Cerner directly!

Training and Events

Quality Improvement Partner's (QIP) Meeting: Tuesday, September 28, 2021 from 2:00pm – 4:00pm via WebEx.

Root Cause Analysis Training: Tuesday, September 14, 2021 from 9:00am – 12:00pm via WebEx. (*Rescheduled from 9/2/21*).

- This interactive training introduces Root Cause Analysis (RCA), a structured process to get to the “whys and how’s” of an incident without blame, and teaches effective techniques for a successful RCA, along with Serious Incident Reporting requirements. The intended audience of this training are program managers and QI staff.
- Registration required – all spots are currently filled, and all new registrants will be added to the waitlist. If a space opens, you will be notified via email of your updated registration status. Please [click here](#) to be added to the waitlist.

Audit Leads Practicum: Monday, September 27, 2021 from 9:00a – 12:00p via WebEx. Registration Required.

- Focus of this training is to provide technical assistance to Program Level QI staff and PM's that conduct chart audits.

Important information regarding training registrations:

- Please be aware when registering for required or popular trainings, either with the county or a contracted trainer, there may be a waiting list.
- When registered for a training, please be sure to **cancel within 24 hours of the training if you are unable to attend.** This allows those on a wait list the opportunity to attend. **Program Managers will be informed of no shows to the trainings.**
- If registered for a training series, please be aware that attendance for all dates in the series are required to obtain certification, CEU's or credit for the training.
- **When registering for a training please include the name of your program manager.**
- We appreciate your assistance with following these guidelines as we work together to ensure the training of our entire system of care.
- If you have any questions, or if you are having difficulty with registration, please reply to this email or contact BHS-QITraining.HHSA@sdcounty.ca.gov. We hope to see you there.

Resources and Links

BHS COVID-19 Resources and Links

Remember, for the most current and updated information regarding COVID-19 as well as QM updates and memos, including provider FAQ's, please access the [COVID-19 tab](#) on the Optum Website

Is this information filtering down to your clinical and administrative staff?
Please share UTTM with your staff and keep them *Up to the Minute!*
Send all personnel contact updates to QIMatters.hhsa@sdcounty.ca.gov