

San Bernardino County Department of Behavioral Health

Quality of Care Referral Procedure

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Purpose To detail steps for referring quality of care issues to the Department of Behavioral Health (DBH) Quality Management Division (QMD).

Quality Management Division QMD reviews the quality of Mental Health and Substance Use Disorder (SUD) services provided to beneficiaries. QMD responds to quality of care referrals in the following ways:

- Reviews, tracks, and monitors the resolution of beneficiary grievances and appeals for both Mental Health and SUD services, state fair hearings, provider appeals, and inpatient and outpatient quality improvement (QI) referrals;
- Makes determination whether quality of care is an issue and whether community standards of care are met;
- Requests additional information from those involved, if quality of care issues are found;
- Issues a letter, composes an email or generates a telephone call to service provider or other party expressing concern over events which occurred and recommends specific remedial steps be taken to prevent recurrence;
- Requests service provider submit a plan of correction;
- Reports its findings to Quality Management Action Committee (QMAC), together with a request for specific action (e.g., a change in Departmental policy or procedure);
- Reports its findings to the Chief of Quality Management, applicable Deputy Director(s) and to the Director of the Department of Behavioral Health for administrative action, as appropriate;
- Reviews data elements using independently gathered information (as well as information from the DBH Research and Evaluation Division, and grievance database to track beneficiary and system outcomes) to improve the process of providing care and better meet the needs of beneficiaries;
- Recommends policy decisions, policy changes and procedures to improve the quality and delivery of services.

If QMAC and/or DBH Administration has a recommended course of action(s), the Chief of Quality Management is notified and shall log the results of QMAC's deliberations as well as any response(s) by DBH Administration.

Note: If, as a result of a final review, a particular quality of care issue did not receive a sufficient full review or appropriate response as determined by QMAC, the matter may be placed on the agenda for the DBH Executive Work Group.

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Quality of Care Referral Procedure, Continued

Roles/Responsibility The following table lists the roles and responsibilities for referring quality of care issues to the appropriate staff:

Roles	Responsibility								
Client	Files a grievance or appeal with the DBH Access Unit.								
Access Unit Clinical Therapist II/ Supervisor	<ul style="list-style-type: none"> Determines whether there is a quality of care issue. If so, notifies the Chief of Quality Management and refers grievance for response to the appropriate program for response in accordance to grievance timeframes. 								
Access Unit Clinical Therapist II or Supervisor	Logs the quality of care issues and refers it to the appropriate staff, programs or committee: <table border="1" style="width: 100%; margin-top: 10px;"> <thead> <tr> <th style="text-align: center;">If...</th> <th style="text-align: center;">Then...</th> </tr> </thead> <tbody> <tr> <td>SUD</td> <td>Refers to Substance Use Disorder and Recovery Services (SUDRS) Program Manager</td> </tr> <tr> <td>Mental Health or SUD</td> <td> Refers to the following: <ul style="list-style-type: none"> Appropriate DBH Deputy Director Quality Management Action Committee DBH Director, as appropriate </td> </tr> <tr> <td>Medical Quality of Care</td> <td>Refers to the DBH Chief Psychiatric Officer</td> </tr> </tbody> </table> <p>The Access Unit Clinical Therapist II or Supervisor assumes responsibility for follow-up with regard to the action recommended, and logs the outcome in the internal Quality of Care Referral Log.</p>	If...	Then...	SUD	Refers to Substance Use Disorder and Recovery Services (SUDRS) Program Manager	Mental Health or SUD	Refers to the following: <ul style="list-style-type: none"> Appropriate DBH Deputy Director Quality Management Action Committee DBH Director, as appropriate 	Medical Quality of Care	Refers to the DBH Chief Psychiatric Officer
If...	Then...								
SUD	Refers to Substance Use Disorder and Recovery Services (SUDRS) Program Manager								
Mental Health or SUD	Refers to the following: <ul style="list-style-type: none"> Appropriate DBH Deputy Director Quality Management Action Committee DBH Director, as appropriate 								
Medical Quality of Care	Refers to the DBH Chief Psychiatric Officer								

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Quality of Care Referral Procedure, Continued

**Roles/
Responsibility**
Continued

Roles	Responsibility
Quality Management Division	<p>Monitors quality of care, reviews the matter and recommends a course of action, which could include:</p> <ul style="list-style-type: none"> • Letter of concern to the provider/agency involved. • Request for a plan of correction if the issue reflects a pattern of quality of care issues. • Referral to DBH administration for possible modification, suspension or termination of the provider's/agency's status or other sanction as appropriate. <p>Note: The provider's contract indicates the Quality Management Division may request an annual review of Quality Management/Quality Improvement plans.</p>

**Review of
Inpatient
Charts for
Mental Health**

The following table lists the roles and responsibilities required when a potential quality of care issue is identified by an Inpatient Authorization Unit nurse/clinician during a review of an inpatient chart:

Role	Responsibility
Reviewer	Completes the potential Quality of Care Referral Letter and sends it to the respective hospital to investigate/follow-up. If the issue is medication related, the reviewer confers with the Physician Advisor who determines if further action is required.
Access Unit Clinical Therapist II or Supervisor	Logs in the letters sent to hospitals and reviews to determine if a pattern of quality of care issues exist. May consult with the Chief of Quality Management and/or refers to QMAC. The Access Unit Clinical Therapist II or Supervisor shall log the outcome in the internal Quality of Care Referral Log.
Chief of Quality Management	<p>If further action is recommended after the review, it may include the following:</p> <ul style="list-style-type: none"> • Letter of concern to the respective provider/agency. • Request for a plan of correction. • Referral to DBH Administration for possible modification, suspension or termination of the provider's/agency's status or other sanction as deemed appropriate.

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Quality of Care Referral Procedure, Continued

Referrals from Concerned Staff and Consumers

The following steps are required when the Access Unit accepts reports of potential quality of care referrals from concerned staff and consumers:

Role	Responsibility
Access Unit Clinical Therapist II or Supervisor	Logs the referral in the internal Quality of Care Referral log and screens, and forwards the referrals to the Chief of Quality Management and QMAC. The Access Unit Clinical Therapist II or Supervisor logs the outcome in the Quality of Care Referral Log.
Chief of Quality Management	Reviews the matter and recommends a course of action, which could include: <ul style="list-style-type: none">• Letter of concern to the provider/agency involved• Request for a plan of correction if the issue reflects a pattern of quality of care issues• Referral to DBH administration for possible modification, suspension or termination of the provider's/agency's status or other sanction as appropriate.

Related Policy

- DBH Standard Practice Manual:
- Quality of Care Referral Policy [QM6022](#)

References

- California Code of Regulations, Title 9, Chapter 11, Section 1810.440
- California Department of Health Care Services Revenue Agreement for Substance Use Disorder Services