

## Quality Assurance Bulletin

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Program Support Bureau

County of Los Angeles - Department of Mental Health Marvin J. Southard, DSW, Director

## NEW GUIDE TO QUALITY ASSURANCE CHART REVIEW REQUIREMENTS FOR DIRECTLY-OPERATED PROGRAMS

The Quality Assurance Division has developed and finalized a "Guide to Quality Assurance Chart Review Requirements for Directly-Operated Programs" (hereafter referred to as the Guide to QA Chart Reviews), a universal Chart Review Tool and a Quarterly Monitoring Report. All directly-operated programs must implement the requirements of the Guide to QA Chart Reviews by October 1, 2012. Per the Guide to QA Chart Reviews section 2.2, Directly-Operated programs should provide the written description of their QA process to the QA Division by October 1, 2012.

The **Guide to QA Chart Reviews** establishes a standardized and systematic process for reviewing clinical records in order to ensure compliance with all DMH policies and procedures. It also provides requirements for evaluating and monitoring clinical documentation and developing processes for enhancing staff training and service delivery.

The **Chart Review Tool** is a standardized tool that meets the minimum requirements for reviewing clinical records on an initial and annual basis for Directly-Operated programs. The Chart Review Tool may not be altered and must be used by all Directly-Operated programs for conducting chart reviews. Directly-Operated programs may choose to review additional elements when completing chart reviews; however, the additional elements must be recorded on a separate document attached to the Chart Review Tool.

The **Quarterly Monitoring Report** is a tool used every three months to provide feedback to the Quality Assurance Division of the Chart Reviews done at each Directly-Operated program. The Quality Assurance Division will provide technical assistance to Directly-Operated programs based on the Quarterly Monitoring Reports. The Quarterly Monitoring Report also allows for a brief description of chart review trends, findings and plans of correction to be provided, which the QA Division will use to guide technical assistance to the program and develop future documentation trainings, guidelines, and Bulletins.

All documents related to the QA Process have been placed on the QA website online at: <a href="http://psbqi.dmh.lacounty.gov/QA\_Div.html">http://psbqi.dmh.lacounty.gov/QA\_Div.html</a>. The Chart Review Tool and Quarterly Monitoring Report may be completed in PDF Fillable format on this site. Note: The Guide to QA Chart Reviews, Chart Review Tool and Quarterly Monitoring Report dated September 10, 2012 replace the tools introduced for the pilot programs. These updated documents incorporate comments and feedback from the pilot programs as well as new requirements based on the new State Contract (see QA Bulletin 12-06).

While the Guide to QA Chart Reviews, Chart Review Tool and Quarterly Monitoring Report are for use by Directly-Operated programs, Contract agencies are expected to have a QA Process for reviewing clinical records in place. Contract agencies may use the QA Division's tools but must take full ownership and responsibility for the use of them. Contract agencies must ensure the tools meet their understanding of Medi-Cal reimbursement requirements based on Policies & Procedures, Manuals and other Bulletins provided by LA County DMH and the Quality Assurance Division.

Questions from the Program Head or QA Chairperson at each Directly-Operated program may be directed to their QA Division Lead (see QA Bulletin 12-05 for Division Leads for each service area).

If Contract agencies have any questions regarding this Bulletin, please contact your SA QA Liaison.

c: Executive Management Team
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