



LA COUNTY DMH LEGAL ENTITY CHART REVIEWS

Implementation of Recommendations



Quality Assurance Unit: Training and Operations
April 7, 2021

About this Presentation

- This video presentation is meant to provide guidance to Contract Providers after their **Legal Entity (LE) Chart Review** has been conducted by Los Angeles County Department of Mental Health (LACDMH)
- For additional information on Legal Entity Chart Reviews, click on **Chart Review Requirements** on the Quality Assurance webpage of the LACDMH website (<https://dmh.lacounty.gov/>)
- The target audience for this presentation are for Program Directors/Managers, QA managers, Clinical managers, and staff of Legal Entity providers who are contracted with LACDMH
- We highly recommend reviewing the LACDMH LE Chart Reviews presentation prior to viewing this presentation



Now What?

- What happens after your Legal Entity has gone through the LE Chart Review Process?
- How can you incorporate the LACMH-QA Reviewer's observations and recommendations to ensure that federal, State and County requirements associated with the provision of Medi-Cal, Specialty Mental Health Services are met?
- What support can the LACDMH-QA Unit provide?



Plan of Support: Implementing the Chart Review Recommendations

- At the Exit Meeting, the LE Provider and the LACDMH QA Reviewer* will discuss next steps and a timeline for when the Plan of Support Meeting (the follow-up meeting) will take place
 - The Plan of Support Meeting is a discussion on next steps, including but not limited to: (1) how to implement change based on the recommendations from the Chart Review Summary Report, and (2) setting timelines for follow up support by DMH and monitoring the implementation process
 - The Plan of Support Meeting will be scheduled and take place within 2-4 weeks of the Exit Meeting
- Topics in the Plan of Support Meeting include:
 - What the provider will do to implement recommendations within a set timeframe and
 - What LACDMH QA Unit will do to assist in implementation

*For the purpose of this presentation, LACDMH QA Reviewer will be referred to as QA Reviewer or QA Lead hereafter.



Tips on How to Implement the Chart Review Recommendations

- Actively participating in the Implementation Process for Chart Review Recommendations
- Understanding the takeaways and concerns from the Chart Review Summary Report by asking questions and gaining clarification
- Having a collaborative relationship with your EHR vendor and understanding the use of the system to meet documentation requirements and maximize use of monitoring tools
- Considering Clinical Implications and Recommendations (how do observations, recommendations, and implementation improve clinical practice?)
 - Coordination of Services
 - Continuity of Care



Chart Review Final Summary Report Recommendations

- The recommendations provided in the Chart Review Final Summary Report are tailored to your agency based on the observations made from the chart review
- There may be no recommendations or multiple recommendations from a chart review

Examples of Recommendations for Follow-up Support

	•Direct consultation with LACDMH Quality Assurance Unit
	•Review of current QA process with LACDMH QA Unit and submit updated version if needed
	•Review of current training process and materials with LACDMH QA Unit for feedback
	•Tailored training
	•Schedule monthly check-ins for 3 months
	•Follow-up review in 6 months
	•Other



Recommendations for Follow-Up: Direct Consultation with LACDMH QA Unit

- QA Leads are available for collaboration and technical assistance and support via conference calls and emails
- Technical Assistance and Support includes discussion and review of:
 - The Chart Review Summary Report, recommendations, and plans of support implementation
 - LACDMH Policies, the [Organizational Provider's Manual](#), QA Bulletins, [A Guide to Procedure Codes](#), and other QA resources to assist with maintaining adherence to the requirements set forth by local, State, and federal standards



Recommendations for Follow-Up: Review of Agency's Current QA Process

- Each Legal Entity must have a written quality assurance process in place in order to ensure that all federal, State, and local requirements are met by monitoring documentation and providing feedback to practitioners to reinforce documentation and claiming practices
- QA Reviewer will review and discuss the agency's current QA Process and provide supportive feedback and recommendations to enhance oversight practices



Recommendations for Follow-Up: Review of Training Process and Materials

- LACDMH maintains an Organizational Provider's Manual, which reflects current requirements from federal, State, and local sources, as reference and guidance
 - Change in standards impact clinical, documentation and claiming practices
 - To remain current and up to date, providers are expected to be trained
- QA Reviewer will review and discuss the agency's training process and training materials for feedback to ensure current information is disseminated and discussed for comprehension
 - The QA Reviewer may request to sit in on an agency's in-house training to provide feedback and support



Recommendations for Follow-Up: Tailored Training

- A Legal Entity Chart Review provides information on the strengths of an agency and what are opportunities for improvement
- Based on the observations of the LE Chart Review, the QA Reviewer may recommend specific online trainings to review and/or provide a tailored training to the agency based on the provider's needs
- Tailored trainings will be a collaborative process with the QA Reviewer and with the agency's QA Manager and/or Clinical Director to address areas of improvement within the agency



Recommendations for Follow-Up: Schedule Monthly Check-Ins for 3 months

- QA Lead will check in with Agency QA Manager monthly for 3 months to monitor and follow up on the implementation process and provide support
- Monthly Check-Ins may include:
 - A review of EHR reports or documentation that facilitates the implementation of the Plan of Support
 - A discussion on the progress of implementation
 - A review of one randomly selected client chart



Recommendations for Follow-Up: Follow Up Review in 6 months

- The purpose of the follow-up chart review is to monitor documentation and implementation of recommendations from the previous chart review
- The DMH QA Team will coordinate a follow-up chart review in 6 months
- A Notification Letter, Attachment A, and a list of client identification numbers will be sent out to the Provider by a QA Team Member for the follow-up chart review



Recommendations for Follow-Up: Other

- QA Support is a collaborative process between provider agencies and the QA Reviewer
 - The agency may request additional QA technical assistance and support options that are not already listed under the recommendations provided by the QA Reviewer
 - The QA Reviewer will work with the agency to provide guidance, resources, and referrals (as appropriate) to meet the agency's needs



QA Support: A Collaborative Process



Thank You for Watching!

To locate policies regarding documentation and claiming, please go to:

<https://dmh.lacounty.gov/>

For provider manuals and other QA resources related to documentation and claiming,
please go to:

<https://dmh.lacounty.gov/qa/>

QA questions can be sent to the QA Mailbox:

QualityAssurance@dmh.lacounty.gov

