



Quality Management Plan
Mental Health Services
FY20-FY21

OVERVIEW

Camino Real Community Services (CRCS) defines quality as an ongoing collaborative effort with internal customers, external customers and other stakeholders. Utilizing various forums that afford each group an opportunity to describe and define quality. The concept of quality involves a dynamic attitude that permeates all areas of the organization and has a direct impact on all stakeholders. The ultimate achievement of quality lies in meeting the highest expectations of the individuals served.

The Quality Management Plan provides CRCS with a systematic, objective, and continuous process for monitoring, evaluating and improving the quality and appropriateness of the service delivery systems within our organization. It assists CRCS in assuring existing standards of care are met and provides the framework to obtain feedback from stakeholders on the manner in which the center conducts business.

Mission, Vision, Values and Guiding Principles

The Quality Management Plan is driven by, and supports the mission, vision, values and guiding principles of Camino Real Community Services. These statements follow, respectively:

Mission

*Abriendo Puertas...Opening Doors
through choice, dignity and respect.*

Vision

As a thriving Center, Camino Real, in partnership with consumers, families, communities, service providers and policy makers envision:

- *Quality customer driven services;*
- *Accessible, innovative and culturally sensitive service;*
- *Communities which embrace and support persons with mental illness, and intellectual and developmental disabilities;*
- *Consumers achieving their individual dreams;*

Values and Guiding Principles

INDIVIDUAL WORTH

We affirm that the individuals we serve share with us common human needs, rights, desires and strengths. We celebrate our cultural diversity and individual uniqueness and commit ourselves to support and enable each person's choices and preferences.

QUALITY INTEGRITY

We commit ourselves to the pursuit of excellence in everything we do. We believe that our personal and professional integrity is the basis of public trust.

DEDICATION

We take pride in our commitment to public service and to the support of the people we are privileged to serve.

INNOVATION

We are committed to developing an environment which inspires and promotes innovation, fosters dynamic leadership and rewards creativity among our staff, volunteers and the people we serve.

PARTNERSHIP

We believe that our vision and values are best realized when individuals working in teams achieve positive outcomes.

STRUCTURE, ORGANIZATION AND FUNCTIONS

The Quality Management Plan defines an organizational and functional structure and a core set of performance indicators. It provides collaborative opportunities to evaluate processes and identify, establish, and implement best practices in quality management areas. The goal is to use all available resources in striving to achieve optimal outcomes with continuous, incremental improvements in quality, which are consistently representative of a high standard of practice in the community.

QUALITY MANAGEMENT

Quality Management consists of the QM Director, QM Specialist, the Records/HIPPA Coordinator and two file clerks. QM Department is responsible for agency audits, complete reports required by Health and Human Services Commission (HHSC) as well as those requested by CRCS executive staff. While the QM Department provides the focal point for quality improvement, the responsibility for quality services lies with all staff including the following committees:

EXECUTIVE COUNCIL

The **Executive Council** is the senior management team of Camino Real Community Services. It is comprised of the Executive Director, the Director of Human Resources, the Director of Early Childhood Intervention Services, the Director of Mental Health Services, the Director of IDD Services, the Director of Quality Management, and the Chief Financial Officer. This Team meets bi-weekly and is responsible for:

- Review of any new legislative action that may impact the Center
- Review of financial reports
- Review of Data Management Reports
- Monitoring of individual program status, to include upcoming reviews, state audits, etc.
- Review of Medicaid and other reimbursement reports
- Implement, oversee and review Quality Management activities
- Monitoring for Compliance of Contract and Standards.
- Monitor indicators of service provision.
- Monitor staff productivity
- Monitor CRCS Risk Assessment / Risk Management issues and resolve issues
- Reviewing management reports to ensure that issues related to both staff and consumer needs are properly handled.

Camino Real is a small community center so the Executive Council also functions as the **Quality Management Committee** and is responsible for the overall oversight of quality management activities. Such activities include, but are not limited to, the following:

- Identification of performance indicators and prioritization of improvement activities;
- Evaluation of the results of ongoing measurement processes;
- Review of data collected and identification of trends;
- Ensure coordination and integration among agency quality efforts;
- Oversight of the Quality Management Program;
- Oversight of the Utilization Management processes;

- Identification of best practices within its network of providers;
- Monitoring of improvement plans; and
- Oversight of the implementation of the goals and objectives of the Local Service Area Plan.

RISK MANAGEMENT / SAFETY COMMITTEE

The **Risk Management/Safety Committee** is chaired by the Risk Manager and includes representatives from each program area. This committee is responsible for reviewing the following:

- Plan for disasters
- Ongoing Site Reviews to prevent maintenance issues
- Analysis of risk indicators to identify trends
- Compliance with Safety Plan
- Routine fire and disaster safety drills

UTILIZATION MANAGEMENT / UTILIZATION REVIEW COMMITTEE

The **UM/UR Committee**, chaired by the Quality Management Director, formally meets at least quarterly however meetings are held as needed to address issues that arise. The MH Department employs a dedicated Data Manager who provides ongoing reports to all MH staff. Adding this position has impacted the center's ability to achieve oversight of services in a more effective manner. The MH Director meets with the directors of MH programs weekly to review targets and measure performance. The UM/UR committee is responsible for the following:

- Reviewing and monitoring of EHR and MBOW data, analyzing trends and identifying outliers related to both internal and external providers.
- Review and approval of practice guidelines in accordance with TRR requirements to deliver treatment in the most effective and efficient manner.
- Review and approval of processes for making utilization/resource allocation determinations (including the formal determination of medical necessity) based on clinical data, practice guidelines, and information regarding the client's needs with consideration of the client's and the LAR's treatment preferences and objectives.
- Review of data for accuracy to identify organizational and/or clinical issues to address.
- Review reports on intake, eligibility determinations, waitlists and other authority functions.
- Review of reports on provider performance and outcomes, including provider profiling.
- Oversight of initiatives such as the HB13 programs are done by the UM committee.

MEDICATION UTILIZATION REVIEW

The Medical Director will be responsible for policies and procedures regarding medication related services. At a minimum, at least semiannually, the Medical Director and other medical staff will review and evaluate the medication utilization practices in each service setting of Camino Real. The following areas will be required for review:

- Appropriateness of prescribing;

- Documentation;
- Polypharmacy;
- Emergency use of psychoactive medication;
- PRN use of medication;
- Medication errors/events;
- Adverse drug reactions; and
- Frequency of medication monitoring

These areas will be reviewed and any strategies for improvement identified and approved by the medical staff for implementation.

HUMAN RIGHTS COMMITTEE

Established as mandated by the Texas Administrative Code, for the protection, preserving, promoting and advocating for the health, safety, welfare and legal and human rights of consumers, chaired by the Rights Officer. The **Human Rights Committee** is responsible for:

- Ensuring that consumer rights restrictions are addressed utilizing the least restrictive alternative;
- Ensuring that restrictions implemented are addressed using established guidelines;
- Meets upon submission of any rights restrictions for review;
- Ensuring that minutes are maintained, which include date, place of meeting, individuals present, recommendations, actions taken and unresolved issues.

PLANNING AND NETWORK ADVISORY COMMITTEE

Camino Real Community Services has developed a separate **Planning and Network Advisory Committee (PNAC) for Mental Health and IDD**. These include consumers, family members, community members and advocates. The role of the Planning & Network Advisory Committee is to advise CRCS on planning, development and evaluation of the provider network and to respond to special assignments given by the Board of Trustees. The Planning & Network Advisory Committee meets at least quarterly.

The Planning and Network Advisory Committee is responsible for assuring that local stakeholders have direct input and involvement in assessing and determining the service needs of CRCS.

The PNAC is responsible for:

- Identifying the most important service needs in the community;
- Providing input regarding the community's feedback for the purpose of Local Service Area Planning;
- Providing input and feedback regarding the Center's budget on an annual basis;
- Reviewing consumer feedback regarding services, via satisfaction survey results, and making recommendations on improvement activities; and
- Advising the Board of Trustees on the Committees recommendations regarding network development and other planning initiatives.

BOARD OF TRUSTEES

The **Board of Trustees** of Camino Real Community Services has ultimate responsibility for the quality of services, practices, and outcomes of the organization. The Board delegates responsibility for the development, implementation, oversight, and evaluation of the Quality Management Plan to the Executive Director and her leadership team. The QM Department provides a monthly report to the Board regarding any audits conducted. The Board of Trustees mission is:

- To maintain the viability of CRCS through Board actions in the allocation of resources;
- To hold ultimate responsibility for the quality of the CRCS care/outcomes and the services, practices and outcomes of the contracted providers;
- To review, to provide input for, and to approve the Center's planning activities, as outlined within this plan;
- To ensure the involvement of stakeholders, to include consumers, families, advocates and interested citizens in the planning process through the Planning and Network Advisory Committee; and
- To ensure that CRCS and its contract providers deliver the highest quality services to consumers and families in our communities.

EXTERNAL QUALITY MANAGEMENT ACTIVITY

Medicaid Managed Care Quarterly Reviews

Since the transition of Medicaid Rehab and Case Management to managed care, Camino Real has participated in quarterly, comprehensive reviews with the MCO staff. These reviews provide information related to contract compliance and service provision. They have provided an opportunity for improvement in care.

MONITORING, ASSESSMENT, EVALUATION AND IMPROVEMENT

Collection of Quantifiable Data

Data is collected through audits and reviews, reports from the Data Warehouse (MBOW), Encounter Data, and Risk Assessment data. The MH Data Manager releases routine reports weekly and monthly so any problem areas are quickly identified and addressed. The Director of MH Services meets with the Data Manager and program directors on a weekly basis to review data and ensure each program is on target for meeting measures. Quality Management has determined several methods of data collection to be preferable in achieving results efficiently. Using the Data Warehouse and utilizing the sample size methodology as well as streamlined audit tools are preferred data collection methods. Camino Real's QM Specialist conducts routine record audits for data to evaluate the Center's efficacy. This includes reviewing processes for fidelity to the TRR model.

Analysis and Evaluation of Data

Once data have been collected, the Executive Council, UM/UR Committee, and/or the QM Specialist review it. Quantitative analysis is conducted using audit tools to look for presence or absence of specific information. Qualitative analysis is performed by measuring actual results against quality indicators. This data is shared with all supervisory staff within MH Services which allows for correction and training at the provider level. The monitoring of systems, processes, and outcomes is part of the process of analysis and evaluation. The outcome of the monitoring is a reporting mechanism that holds Camino Real accountable for demonstrating that service delivery systems provide appropriate, efficient, and cost-effective services and supports.

Identification of Trends

Strengths and areas of need are identified from analyzing data collected. Strengths within a program are assessed for applicability to positively influence programs. Areas of need within a program require either a formal or informal Plan of Improvement describing strategies for improvement. The QM Process assists in identifying program practices at individual sites for possible implementation at other sites. Routine collection of data will assist in the initial identification of benchmarking practices.

Review/Revision of the Plan

The Quality Management Plan for Camino Real Community Services is intended to be a functional and dynamic document that evolves over time. Thus the QMP will be reviewed, at least on a quarterly basis, and will be revised as directed by identified needs. At a minimum, it is expected that the plan will be revised to reflect changes in quality indicators and performance expectations.

ATTACHMENT 1

Client Rights Protection Process

Camino Real Community Services is dedicated to the preservation of each consumer and their right to fully exercise and practice their legal, civil, and human rights. All Camino Real stakeholders are mandated to engage in efforts to assist individual consumers in the practice of their rights, and to perceive themselves as persons of value, who are capable of mastering a variety of skills and abilities. In concert with this philosophy, the following key elements are the basis for rights protection and reinforcement.

- Recognizing that people with mental illness or intellectual and developmental disabilities have the same rights as all citizens;
- Ensuring that an individual's rights are not denied;
- Assisting and guiding people with mental illness or intellectual and developmental disabilities to enable them to exercise their rights to their fullest extent;
- Teaching people with mental illness or intellectual and developmental disabilities how to conduct themselves and to assume responsibility for their action;
- Encouraging persons with mental illness or intellectual and developmental disabilities to exercise the highest level of self-determination and personal autonomy that is consistent with their capacity to understand the risks and consequences of their choices;
- Acting to ensure that consumers live, work, and otherwise experience the most integrated and least restrictive environments and measures are implemented as consistent with the consumers abilities and needs; and,
- Providing and advocating for the availability of integrated and non-stigmatized experiences, environments, and opportunities for people with mental illness or mental retardation.

Copies of the respective booklets; [Rights of Persons Receiving Mental Health Services](#), [Your Rights in Local Authority Services](#), [Your Rights in a Texas Home Living Program](#) or [Your Rights in a Home and Community-Based Services Program](#) will be made available to all consumers and interested parties.

The following process has been implemented to insure that all persons served by Camino Real Community Services achieve their rights as well as have their rights protected.

Achieving Rights:

Persons served shall be informed orally and in writing of their rights. All persons served shall at a minimum be provided a copy of the appropriate IDD Rights Booklet before or at the time of admission, and during any special or annual conferences with the consumer or legal guardian. Assistance with special communication/language needs will be provided as appropriate to identify and satisfy the need.

At the time of the annual assessment process or as needed, the consumer's need and/or potential for rights education will be evaluated. If the evaluation indicates the individual has the need/potential for rights education, the person's team will: make citizenship and rights training a priority, and explain and ensure all rights are taught in a method designed to accommodate the consumer's learning capabilities.

Complaint/Inquiry Access:

Consumers, family members, advocates, staff, or other persons are encouraged to address any concerns to the Human Rights Director/Officer. The complainant shall be free from reprisal for the complaint action. The following person(s), groups, and offices may be contacted without prior supervisory approval.

- The Camino Real Rights Officer
- The respective Human Rights Committee
- The HHSC, Office of Consumer Services and Rights Protection
- The Texas Department of Family and Protective Services
- Advocacy, Inc.

Office of Human Rights Officer

The Office of Human Rights is under the administrative direction of the Executive Director, and is to be maintained at all times. The role of the Rights Officer is to protect and advocate for the legal, civil, and special rights of all consumers; to problem-solve individual consumer complaints; and to report any problems that may be identified as recurrent trends. Duties required of the Rights Officer shall be specified at the discretion of the Executive Director, and shall include the following:

- Receiving complaints of suspected violations of rights, allegations of inadequate provision of services, and requests for advocacy in addressing and resolving complaints;
- Thoroughly investigating each such complaint received;
- Representing each person served and advocating for the resolution of the grievance;
- Reporting the results of investigations and advocacy to the complainants, consistent with the protection of the service recipients' right to confidentiality;
- Reviewing all policies, procedures, practices, behavior therapy programs and rules which affect the rights of individuals receiving services to ensure that the rights of individuals are not unduly restricted;
- Ensuring that the rights of persons served have been thoroughly explained to staff through periodic training; and
- Performing duties and functions as the liaison and point of contact with the Texas Department of Family and Protective Services, regarding investigations of reported instances of suspected abuse, neglect, or exploitation of consumers.

Process for Review of Allegations

Inquiries or allegations may be received from consumers, guardians, family members, friends, public officials, staff members, advocates, persons in the community, the Office of Consumer Services and Rights Protection, or others not aforementioned. The inquiry or allegation is to be recorded on the rights intake form and the review or investigation shall begin as soon as possible, but no later than five working days following receipt of the allegation, and shall be completed within 30 calendar days from the date of receipt. An actual rights violation investigation shall only be considered completed when all necessary documentation has been reviewed, all potential witnesses have been interviewed, and any collateral information collected. Following the investigative process a summary report shall be forwarded to the Executive Director and the appropriate program Director of Services.

Following the investigation, notification should be made to the complainant, and should the complainant be unsatisfied with the resolution, the complainant may appeal to the Executive Director either in writing or verbally. The Executive Director, or designee, shall have no more than 30 calendar days to make a determination as to the action to be taken. If the complainant is dissatisfied with the determination an appeal may be made to the State Office of Consumer Services and Rights Protection.

On a quarterly basis the Executive Council will review the numerical statistics, trends, disposition and issues regarding allegations of rights violations, as well as allegations of abuse, neglect, or exploitation of consumers. Confirmed violations of the rights of a consumer by a Camino Real employee shall result in disciplinary action. The level of discipline shall be weighed according to the following criteria: the severity of the rights violation, the circumstances surrounding the incident, the employee's/agent's work record, repeat offenses, and if a repeat violation, the length of time between violations. Similarly, rights violations may result in a variety of weighed disciplinary actions, or combination of disciplinary actions, such as, but not inclusive to: Human Rights refresher training, or other appropriate training, apology to the person served, performance counseling, loss of contract, or dismissal from employment.

Human Rights Committee

This committee reviews practices and proposed programs to ensure that the rights of a consumer with developmental disabilities are not limited or restricted without due process. Due process means the guaranteed opportunity to be heard, to be informed, to give consent, and to have the determination made by an impartial party. The Human Rights Committee functions as the identified impartial party. The Human Rights Committee must review all proposed rights restrictions or modifications and approve them before they are implemented.

ATTACHMENT 2
Quality Indicators

Indicator	Reviewed Service	Review Methodology	Frequency	Target
Performance contract targets, measures, and outcomes	MH and IDD	MBOW, CARE, and EHR Reports reviews by UM Committee, Medication UM Review and Executive Council	Monthly except for Medication review semi-annually	Meet or exceed
Compliance with Medicaid billing and reimbursement requirements	MH and IDD	Random sample reviews using standard protocol by QM Department	Monthly	95%
Performance Accountability	MH and IDD	EHR reports collected and reviewed by program directors.	Monthly	Varies by job description
Compliance with fidelity for Mental Health Services	MH	Random sample reviews using UM Guidelines as needed	When focus area identified	90% with no repeat principles in noncompliance
Abuse/neglect, injury information	IDD	Reports by Authority staff reviewed by Executive Council	Monthly	No confirmed incidents of abuse/neglect or serious injury
Employee Job Descriptions	Agency wide	Review of employee records by Supervisor	Annually	90% + completed on time
Employee Performance Evaluations	Agency wide	Review of employee records by Supervisor	Annually	90% + completed on time
Waitlist Maintenance and Contacts	MH	Review of reports to ensure timeframes are being met	Quarterly	All timeframes are met and documentation completed

ATTACHMENT 3
YES Waiver Quality Indicators
Quality Management Review

As a participating entity providing YES Waiver (Waiver) services Camino Real will ensure adequate quality management by collecting data and measuring, assessing, and improving performance dimensions in:

1. Providing timely access to Waiver services;
2. Providing timely enrollment of participants;
3. Providing at least one billable service per month (or monthly monitoring if the need for service(s) is less than monthly);
4. Basing plans of care and services on underlying needs and outcome statements;
5. Providing services according to the participant's service authorization;
6. Participating in Child and Family Team meetings;
7. Assuring development and revision of the service authorization;
8. Identifying and updating health and safety risk factors;
9. Collecting and analyzing critical incident data;
10. Credentialing and training providers;
11. Adhering to policies and procedures; and
12. Maintaining continuity of care.

ATTACHMENT 4
QM Work Plan for MH Services FY 20 – FY 21

Month	MH Adult and Child Programs
September	External Provider Focused Review Frio Medicaid
October	Wilson Focused Review Maverick Medicaid
November	Atascosa Focused Review Karnes Medicaid
December	Dimmit/Zavala Focused Review Wilson Medicaid
January	Frio/La Salle Focused Review Atascosa Medicaid
February	Maverick Focused Review Dimmit/Zavala Medicaid
March	Karnes Focused Review Frio Medicaid
April	CRU Focused Review Maverick Medicaid
May	YES Focused Review Karnes Medicaid
June	MCOT Focused Review Wilson Medicaid
July	ACT Focused Review Atascosa Medicaid
August	Maverick Focused Review Dimmit/Zavala Medicaid

All topics for Focused Reviews will be determined in conjunction with the Director of MH Services but will include: Crisis services, Rehabilitation services, Case Management, Wrap Around and other services or topics within the service array. Other reviews will include any desk reviews or on-site reviews by the Health and Human Services Commission.

ATTACHMENT 5

Continuous Quality Improvement Plan

CCBHC- 5.b.1, 5.b.2

Camino Real Community Services system for process design, performance measure analysis and improvement are based on a continuous quality improvement model. The Center's approach to improving its performance includes the following essential processes:

- Developing specific projects meant to focus on agency priorities
- Data collection that measures system performance
- Analyzing data for trends and improvement
- Review of improvement and revision of project to reflect changes

Continuous Quality Improvement processes are designed consistent with the Center's mission, vision, values, principles, needs of the local area, as well as requirements/priorities of HHSC and the CCBHC service delivery model.

Camino Real collects data to monitor the stability of existing processes and identify opportunities for improvement. Collected data is aggregated and analyzed to effectively assess the Center's performance and to determine the effectiveness of designed processes, level of performance and Improvement needs

Improve / Plans of Improvement

The Center develops performance indicators to establish baseline criteria to be met. Though there are many occasions in which criteria is met, targets will be raised to improve upon the baseline established. When performance does not meet criteria, a formal, written plan for improvement is developed. Subsequent performance related to the deficient indicator will then be evaluated to determine the effectiveness of the plan for improvement.

Plans of Improvement (POI) are implemented to increase quality, efficiency and utilization of resources. This process utilizes a retrospective examination to assess effectiveness. POIs are a direct result of the monitoring of quality indicators and are a pivotal point. Analysis and evaluation of the data alerts the QM Specialist to the need for plans of improvement. A POI is developed when data or a review results in a less than the desired performance threshold. POIs require a goal, area of problem or concern, cause of problem/concern, strategies for how improvements will be made, responsible staff and expected completion date/timeline. POIs are developed with the collaboration of all parties involved.

The Quality Management Director works with the QM Specialist in development of the Plan of Improvement, based upon the need. The Executive Director will review the final POI and, if required will provide written approval prior to submission to the responsible State agency. The Program Directors will be responsible for implementation of Plans of Improvement. The Executive Council reviews and evaluates progress towards the goals of POIs to determine if desired outcomes are achieved.

Continuous Quality Improvement Projects

I. Zero Suicide Initiative

- A. Goal Statement:
Camino Real Community Services will participate in the Zero Suicide Initiative.
- B. Time Frame:
The Zero Suicide Initiative will have staff training by December 31, 2020.
- C. Performance Measure:
Camino Real Community Services will have 100% staff complete the ASK Training to effectively identify risk situations and intervene as appropriate.
- D. The agency will use the Plan Do Study Act, rapid change management cycle to review the effectiveness of the process and make changes as appropriate.

Reduce Suicides in the Population Served

- A. Goal Statement:
Camino Real Community Services will reduce the number of deaths by suicide in our client population.
- B. Time Frame:
By August 31, 2021, Camino Real Community Services will have a reduction in deaths by suicide.
- C. Performance Measure:
The Death Review Committee will review the data trends for death by suicide on a quarterly basis.
- D. The agency will use the demographic data of individuals in services who have attempted suicide to develop prevention strategies.

II. Reduce 30-day hospital readmissions

- A. Goal Statement:
Camino Real Community Services will reduce the number of hospital readmissions during the year.
- B. Time Frame:
The reduction in hospitalizations is a short-term goal, to have improvement during the year.
- C. Performance Measure:
Camino Real Community Services will reduce the number of individual hospital readmissions by 10%.
- D. The agency will use the Plan Do Study Act, rapid change management cycle to review the effectiveness of the process and make changes as appropriate.

III. Reduce the number of crisis episodes individuals experience.

- A. Goal Statement:
Camino Real Community Services will decrease the number of clients who have repeat crisis episodes.
- B. Time Frame:
The reduction in crisis episodes is a short-term goal, to provide transitional services to avoid recurring episodes for those individuals who do not meet the state level of care requirements.

- C. Performance Measure:
Camino Real Community Services will increase the transitional care to individuals who have initial crisis episodes and avoid future episodes.
- D. The agency will use the Plan Do Study Act, rapid change management cycle to review the effectiveness of the process and make changes as appropriate.