Behavioral Health Quality Improvement Committee (BHQIC) Charter
Santa Clara County Behavioral Health Services

Background and Purpose

To improve system integration and efficiency and to promote a Medi-Cal beneficiary-centered approach to quality improvement, the Santa Clara County Behavioral Health Services Department (BHSD) is integrating the quality improvement committees for mental health (Mental Health Performance and Quality Improvement Committee [PQIC]) and substance use treatment services (Substance Use Treatment Services Quality Improvement Committee [SUTS QI Committee]). Starting in March of 2018, this integrated committee will be called the Behavioral Health Quality Improvement Committee (BHQIC).

The purpose of the BHQIC is to review the quality and effectiveness of direct services delivery with the aim of improving the processes of providing care and better meeting the needs of Medi-Cal beneficiaries consistent with state and federal requirements. The BHQIC will be responsible for providing input in the development of the annual integrated Medi-cal QI Work Plan, conducting a landscape review of departmental QI activities, and assisting in the development of Quality Teams to address agreed upon priorities, including Performance Improvement Projects (PIPs) for both mental health and substance use disorder treatment, which are required by the State.

Membership and Structure

The membership of the BHQIC will consist of 24 invited members. Membership shall comprise of consumers (2 at minimum), family members of consumers, service providers (including primary care), partners, such as health plans and hospitals, and representatives from the BHSD. Consumers and family members will also be selected to represent the diversity of the community. In order to ensure consumers and family members feel empowered on the BHQIC, a BHSD Executive Committee member will meet with them as needed, in between BHQIC meetings, to help them prepare and discuss any questions and/or concerns they may have. Participation in the BHQIC is voluntary and by invitation of the BHSD. Invitations will be emailed out to selected members in February of 2018, and the BHQIC kick-off will take place in March of 2018. Following that, the BHQIC shall meet bi-monthly.

The BHSD Executive Committee shall be responsible for selecting BHQIC members subject to state requirements. Membership terms shall last two years and may be extended based on the interest of the BHQIC member and approval of the BHSD Executive Committee. If a member chooses to resign their post, the BHSD Executive Committee shall be responsible for selecting a replacement. If a BHQIC member changes their role or accepts a role at another provider organization, for example, they must inform both the BHQIC and BHSD Executive Committee. The BHSD Executive Committee will ultimately determine whether or not the member shall continue on the BHQIC.

As part of the BHQIC members’ responsibilities, the BHQIC will be responsible for assisting in the development of Quality Teams to address priorities and needs. Quality Team members do not need to also sit on the BHQIC, as BHQIC members can recommend experts who would be well suited to participate on such a team. Quality Teams will meet on an ad hoc/as needed basis, and will bring recommendations to the BHQIC, as necessary. If Quality Teams have
requests or proposals that require a financial determination, those will be brought to the BHSD Executive Team for consideration and approval. BHSD Executive Committee members sitting on the BHQIC will be responsible for bringing recommendations to the Executive Committee as they arise.

**Roles and Responsibilities of BHQIC Members**

BHQIC membership will be responsible for the following:

- Providing guidance in the development of the annual QI Work Plan, including an annual landscape assessment of quality improvement efforts within the BHSD.
- Overseeing the implementation of the QI Work Plan.
- Recommending policy and structural changes related to the quality and results of care.
- Recommending, reviewing and evaluating QI activities, including Performance Improvement Projects (PIPs).
- Review and authorization of the required PIPs.
- Instituting needed QI actions.
- Ensuring follow-up of QI processes.
- Documenting BHQIC meeting minutes regarding decisions and actions taken.
- Considering and adopting measurable goals and objectives as part of the QI Work Plan.
- Regularly reviewing the QI Work Plan goals and objectives, identifying trends across programs for QI, and guiding activities to achieve QI Work Plan goals and objectives.
- Maintaining an inventory of what data collection tools agencies are using to determine performance and outcomes.
- Identifying training needs and establishing a plan that furthers staff and provider skills in performance measurement and quality improvement.
- Guiding and supporting the development of a quality culture within the agency.
- Identifying relevant internal or external committees to ensure appropriate exchange of information with the BHQIC.
- Supporting Quality Teams by providing training and technical assistance as requested and advocating for sufficient time and resources for QI activities.

**Roles and Responsibilities of BHQIC PIP Quality Teams**

Quality Teams will be responsible for the following:

- Collecting and analyzing data to measure against the goals, or prioritized areas of improvement that have been identified.
- Identifying opportunities for improvement and recommending or deciding, within their defined scope which opportunities to pursue.
- Identifying relevant internal or external committees to the Contractor to ensure appropriate exchange of information with the QI Committee.
- Obtaining input from service providers, beneficiaries, and family members in identifying barriers to delivery of clinical care and administrative services.
- Designing and implementing interventions for improving performance.
- Measuring effectiveness of the interventions.
- Incorporating successful interventions into the Contractor’s operations as appropriate.