

SITE VISITS - Suggested Procedures

- I. PURPOSE** With the goal of providing high quality, accessible, culturally responsive behavioral health services and programs, delivered efficiently and effectively, with client-centered outcomes, site visits can assist with the following WIC 5604.2 duties:

1. Review and evaluate the community's behavioral health needs, services, facilities and special problems.
2. Review any County agreements entered into pursuant to Section 5650.
3. Advise the Board of Supervisors (or local governing body) and the local Behavioral Health (BH) Director as to any aspect of the local behavioral health program.

II. ROLE OF MENTAL HEALTH BOARD (BHB)

1. Learn about program, service and/or facility, including successes and challenges.
2. Educate the Behavioral Health Board/Commission (BHB) member(s) about the program/facility;
3. Educate the program and clients/consumers about the role of the BHB;
4. Learn about client and family-member satisfaction and concerns;
5. Make recommendations to the BH Director and/or public officials based on site visit findings.

III. ROLE OF COUNTY BEHAVIORAL HEALTH (BH) SERVICES STAFF

It is important to understand the BH Agency staff's role overseeing contractors. Program monitoring is measured by various means and processes:

1. Quantity: number of clients served, number of referrals, admissions, discharges, reduction of waiting lists, etc.
2. Quality: improve an illness, restore or improve social and vocational functioning, maximize client and family members sense of well-being and personal fulfillment, prevent injury to others and to the client, specific percentage improvement upon completion of specific task, upgrading efficiency, stimulating morale, utilization of staff, appropriate supervision, training, evidence based programs utilized, etc.
3. Time: timeliness of service, deadlines met, frequency, number of days to complete, etc.
4. Cost: use of budgetary resources, percent variance from allocation, cost per client, cost per service unit, etc.
5. Consumer/Client satisfaction written surveys examine the adequacy and appropriateness of the services being provided and the extent of the desired outcomes from the client's perspective.

IV. RECOMMENDED BHB SITE VISIT PROCEDURES

- A. **Make Contact** - BHB staff (or BHB member) makes contact with the provider, describing purpose of the site visit, and requesting date for site visit.

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- B. Review Contract** - BHB Staff will provide BHB members who plan to conduct the site visit (less than a quorum) with the current county contract (including “deliverables” and “budget”) related to the site to be visited.
- C. Tour facility** - BHB Members (less than a quorum):
 - 1. Observe interaction between staff and clients/consumers. (Is it respectful? Are clients/consumers comfortable interacting with staff?)
 - 2. Take note of condition of facility, including:
 - 1. Common Areas
 - 2. Dining Area
 - 3. Program Areas
 - 4. Client/Consumer Bedrooms (if invited/appropriate)
 - 5. Outdoor Areas
 - 3. Check to see if there are Posted Grievance Procedures and/or Access to Patients Rights Advocate Contact Information (Call the number posted to ensure it works.)
 - 4. Meeting with site/facility staff (before or after tour): Discussion with program/facility director/staff could be guided by questions in the [Site Visit Observation Form \(Sample\)](#) (www.calbhbc.org/templategsample-docs)
- D. Report to BHB**
 - 1. Provide completed “Site Visit Observation Form” to the Executive Committee (or chair and staff support in very small counties)
 - 2. Once reviewed by the Executive Committee and the BH director or staff, and approved for presentation to the BHB by the Executive Committee, the report can be placed on the agenda for presentation at an upcoming BHB meeting.
 - 3. BHB staff (or Executive Committee) will send a courtesy copy of the report to the contractor, along with the date/time that the report will be heard by the BHB.
 - 4. BHB leadership should request County staff to follow-up with the BHB whenever major deficiencies are identified.