



| BHS Policies and Procedures | |
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|  <p>City and County of San Francisco Department of Public Health San Francisco Health Network BEHAVIORAL HEALTH SERVICES</p> | <p>1380 Howard Street, 5th Floor San Francisco, CA 94103 (415) 255-3400 FAX (415) 255-3567</p> |
| <p>Policy or Procedure Title: Behavioral Health Services Medication Use Improvement Committee (MUIC)</p> | |
| <p>Issued By:</p> <div style="border: 1px solid #ccc; padding: 5px; margin: 5px 0;"> <p>DocuSigned by:  360E6E598F1D468...</p> </div> <p>Imo Momoh, MPA BHS Director Managed Care</p> <p>Date: June 6, 2023</p> | <p>Manual Number: 3.02-26</p> <p>References: 9 CCR §1810.225</p> <p>Annual Review Protocol for Specialty Mental Health Services and Other Funded Service. Fiscal Year 2022-2023, California Department of Health Care Services.</p> <p>ASHP Guidelines on the Pharmacy and Therapeutics Committee and the Formulary System, Am J Health-Syst Pharm. 2008; 65:1272-83</p> |

(New Policy)

Equity Statement: The San Francisco Department of Public Health, Behavioral Health Services (BHS) is committed to leading with race and prioritizing Intersectionality, including sex, gender identity, sexual orientation, age, class, nationality, language, and ability. BHS strives to move forward on the continuum of becoming an anti-racist institution through dismantling racism, building solidarity among racial groups, and working towards becoming a Trauma-Informed/Trauma Healing Organization in partnership with staff, clients, communities, and our contractors. We are committed to ensuring that every policy or procedure, developed and implemented, leads with an equity and anti-racist lens. Our policies will provide the highest quality of care for our diverse clients. We are dedicated to ensuring that our providers are equipped to provide services that are responsive to our clients’ needs and lived experiences.

Purpose: Under the direction of the BHS Chief Medical Officer(s), the Medication Use Improvement Committee (MUIC) serves as the oversight body for BHS medication services and is a subcommittee of the BHS Quality Improvement Committee. The purpose is to provide medication use improvement advisement.

Scope: Issues related to medication services improvement and scope of practice in all Behavioral Health Services. The specifics of the scope of oversight are listed within the policy.

Policy:

1. Scope of oversight include but are not limited to:
 - a. Issues related to medication services improvement and scope of practice
 - i. Plans, policies and/or proposals related to improving medication services
 - ii. Recommend training and research activities related to medication services
 - iii. Clinical protocols for pharmacists, nurse practitioners, other medical practitioners
 - iv. Evaluation of new technologies (medications, supplies, devices)
 - b. Issues related to medication services, including plans, policies and/or proposals for:
 - i. E-prescribing
 - ii. Laboratory electronic ordering and processing of results
 - iii. Health monitoring
 - iv. Medical content of consumer portal
 - v. Monitoring tools and guidelines
 - vi. Vital signs, medical screening as appropriate
 - vii. Decision support and alerts
 - c. Issues related to medications
 - i. Medication consents
 - ii. Plans, policies, and/or proposals related to improving medication use
 - iii. Patient education and medication adherence
 - iv. Medication safety, including medication errors and adverse drug reactions
 - v. Medication and laboratory Formulary management (additions/deletions)
 - vi. Reviewing drug utilization data including review of county-paid (uninsured) prescribing
 - vii. Medication Use Evaluations (review of prescribing practices for drugs that are problem prone and/or high risk and/or high cost)
 - viii. Safer prescribing medication therapy protocols/guidelines
 - ix. Distribution and storage of medications at BHS facilities
 - x. Pharmaceutical industry and medical devices industry related policies and procedures
 - xi. Training and research activities related to medication use improvement
 - d. Other issues at the recommendation of the Chief Medical Officer(s)
2. Membership
 - a. The chairperson and members of the committee shall be appointed by the BHS Chief Medical Officer(s)
 - b. The committee shall consist of at least 8 members, the majority of which shall be psychiatrists, and shall include representatives of BHS System of Care providers including physicians and nurse practitioner(s), psychiatric clinical pharmacist(s), and BHS Quality Management personnel. There will be at least one member that is a contractor. The BHS Director of Pharmacy shall be a permanent member and serve or appoint another member as secretary of the committee. To support alignment of Medication Support Services, membership shall include the ZSFG Formulary manager. The Chief Pharmacy Officer shall be a permanent non-voting member
 - c. Members of the committee shall serve for one year and are eligible for re-appointment
 - d. Members shall complete a Declaration of Disclosure annually to disclose any financial interests in or affiliation with a commercial entity that is a potential conflict of interest. Individuals shall recuse themselves from voting on issues in which there is a potential conflict of interest, and minutes shall note if a member participates in discussion about a topic when there is a potential conflict of interest

- e. Members are expected to actively participate, and to serve for the best interests of BHS clients and the organization to support providing the highest quality of care to clients

3. Meetings

- a. The committee will meet at least four times a year and shall maintain a written and dated record of its proceedings.
- b. A quorum shall be established prior to voting. A quorum consists of a majority of voting members.
- c. Actions are approved by simple majority unless otherwise specified by the BHS Chief Medical Officer.

4. Duties

- a. MUIC is responsible for
 - i. Developing and the surveillance of medication services policies and practices for the behavioral health system
 - ii. Advising the BHS Chief Medical Officer(s) regarding issues related to medication services policy
 - iii. Assisting the BHS Chief Medical Officer(s) in the formation of broad professional policies regarding the evaluation, appraisal, selection, procurement, storage, distribution, use, safety procedures, disposal and all other matters relating to pharmaceuticals for the behavioral health system
 - iv. Monitoring the safety and effectiveness of medication practices at least annually. Monitor psychotropic medication use, including monitoring of psychotropic medication use for children/youth
 - v. Responding to medication-related issues identified by the BHS Risk Management Committee. The liaison for the BHS Risk Management Committee is the BHS Director of Pharmacy
 - vi. Reviewing requests for new technologies (or new use of existing technologies) for medications, medical supplies and medical devices/equipment, and making recommendations for acceptance or denial of the use of new technology
- b. The BHS Director of Pharmacy shall provide an annual report to the BHS Quality Improvement Committee summarizing MUIC activities
- c. The MUIC Chairperson shall
 - i. Report MUIC activities to the BHS Deputy Medical Directors at minimum annually
 - ii. Participate and/or designate representation at ZSFG Pharmacy and Therapeutics Committee as needed for psychotropic medications with behavioral health indications
 - iii. Participate as member the Pharmacy and Therapeutics Committee of the San Francisco Health Plan at the SFHP's invitation

Procedure

- 1. MUIC will monitor the safety and effectiveness of medication practices through the following annually:
 - a. A Drug Use Evaluation (DUE) of all BHS prescribing with multiple year trends (when available) and break downs by age categories and race categories. It will be inclusive of adults and youth
 - b. A DUE of JV220 with multiple year trends
 - c. A DUE of HEDIS measures in foster care
 - d. A summary of medication quality of care reports from Risk Management

- e. An annual peer review with a tool developed by MUIC that includes evaluation of identified clinical meaningful issues from the practice guidelines
2. If the above monitoring practices determines there are clinically meaningful issues affecting clients system-wide, MUIC will develop workgroups, develop policies and procedures, form recommendations for the BHS Deputy Medical Directors or other interventions to address the issues.
3. MUIC practice guidelines
 - a. MUIC develops practice guidelines with the following requirements
 - i. Based on valid and reliable clinical evidence or a consensus of health care professionals in the applicable field
 - ii. Consider the needs of the clients
 - iii. Adopted in consultation with contracting health care professionals
 - iv. Reviewed every 3 years or sooner as appropriate
 - b. The BHS Director of Pharmacy, or their designee, will disseminate the practice guidelines to all providers by e-mail
 - c. The practice guidelines will be made available to all providers, clients and the public through the BHS online public website and made available in print to clients upon request

Contact Person:

Distribution:

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