

**COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH  
PROGRAM SUPPORT BUREAU**

**Departmental Quality Improvement Council Meeting**

**A G E N D A**

**January 14, 2008**

**10:30 a.m.**

550 S. Vermont Ave. 10<sup>th</sup> Floor Conference Room  
Los Angeles, CA 90020

I	10:30 – 10:35	INTRODUCTIONS & REVIEW OF MINUTES	
II	10:35 – 10:40	PERFORMANCE BASED CONTRACTING	Jeff Kohn
III	10:40 – 10:50	MEDICATION REVIEW UPDATE	Gerald Ko
IV	10:50 – 11:00	INTRANET UPDATE	Wendy Turner
V	11:00 – 11:40	COUNTYWIDE QI SYSTEM: Annual QI Evaluation Report <ol style="list-style-type: none"> <li>1. Service Delivery Capacity/System</li> <li>2. Service Accessibility <ul style="list-style-type: none"> <li>• 24 Hr. ACCESS Phone Lines</li> <li>• PMRT</li> </ul> </li> <li>3. Beneficiary Satisfaction/ Beneficiary Grievances</li> <li>4. Clinical Issues</li> <li>5. Coordination/Continuity of Care</li> <li>6. Provider Appeals</li> </ol>	Jeff Kohn
VI	11:40 – 11:50	PERFORMANCE IMPROVEMENT PROJECTS (PIPs)	Ted. Wilson
VII	11:50 – 12:00	OTHER/ANNOUNCEMENTS	
Proposed Agenda Items for Next Meeting			

**Next Meeting**

**February 11, 2008**

**10:30 – 12:00 Noon**

**695 S. Vermont Avenue**

**15<sup>th</sup> Floor Main Conference Room**

**Los Angeles, CA 90005**

**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH**  
**Departmental QIC Meeting, January 14, 2008**

<b>Type of Meeting</b>	Departmental Quality Improvement	<b>Date</b>	3946100%
<b>Place</b>	550 S. Vermont Avenue, 10th floor Conference Room	<b>Start Time</b>	10:44 a.m.
<b>Chairperson</b>	Martha Drinan, RN, MN, APRN	<b>End Time</b>	12:03 p.m.
<b>Members Present</b>	Martie Drinan, Lupe Ayala, Florestean Filucas, Vivian Matsushige, Peter DeGyartfas, Belen Fuller, Patrice Grant, Michelle Hernandez, Jeffrey Kohn, Kimber Salvaggio, Anahid Assaturian, Norma Fritsche, Sylvia Guerrero, Rashid Jibri, Nancy Kless, Kumar Menon, Gerald Ko, Dennis Murata, Jaime Nahman, Mary Ann O'Donnell, Teresa Quijano, Wendy Turner, Ann Lee, Robert Thompson, Maria N. Tan, Nina Johnson, Celina Johnson, Julia Chen, Carol Eisen		
<b>Absent Members</b>	Paul Arns, Frank C. Baron, Bart Callender, Chan Wayland, Nahed Guirguis, Gloria Lara, Bertrand Levesque, Robert Levine, John Ortega, Sukeda K. Day, Theodore W. Wilson, Julie Valdez, Eduardo Vega, Larry Wicker, Jessica Wilkins		
<b>Agenda Item &amp; Presenter</b>	<b>Discussion and Findings</b>	<b>Decisions/ and Recommendations/ Actions/Scheduled Task</b>	<b>Person Responsible/ Due Date</b>
<b>Call to Order &amp; Introductions</b>	The meeting was called to order at 10:44 a.m.		Martie Drinan
<b>Review of Minutes</b>			Departmental QIC
<b>Performance Based Contracting</b>	All providers were invited to attend a meeting held on December 5, 2007.	Jeff Kohn attended this meeting and provided feedback.	Jeff Kohn
	Gurabanda Singh Khalsa coordinated the December 5, 2007 meeting summarizing Performance Based Contracting. There are 8 PBC outcome measures from the MHSIP, YSS, and YSS - F. There are a total of 10 outcome measures. Baseline starts this year on January 1, 2008. There are specific PBC outcome measures and specific data sources to measure the outcome measures.	At the meeting, Gurabanda requested that any provider that wanted to participate on the steering committee can do so by contacting him. It is important that we have wide stakeholder participation with the baseline data collection issues.	Gurabanda Singh-Khalsa Martie Drinan

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<p><b>MHSIP November 2007</b></p>	<p>Ted Wilson is coordinating the MHSIP. The MHSIP scanning and data entry is contracted out to Hersheys Technologies. Providers are submitting survey forms in bad condition; either photocopying is of bad quality or staples are removed losing part of the information. It is very important that the information be accurate and complete otherwise they may not get credit for rejected forms.</p>	<p>Survey Liaisons will work to ensure improved quality of surveys submissions.</p>	<p><b>Ted Wilson</b></p>
<p><b>Question:</b> Is the requirement for continuity of care 5 days or 7 days from the date of discharge from an acute psychiatric inpatient hospital?</p>	<p><b>Answer:</b> The current requirement is for: "7 calendar days".</p>	<p>Will clarify to include in the appropriate Policy &amp; Procedures revisions.</p>	<p><b>Mary Ann O'Donnell</b></p>
<p><b>Pharmacy Question:</b> Do we have any data on hospital discharges?</p>	<p>We have a policy that we only pay for a certain amount of medication post - discharge from psychiatric inpatient hospitals.</p>	<p>Psychiatric Inpatient Hospital Discharge reports are available concerning this data. There is a Plan to Contract for Pharmacy Benefit Management. Decision was made to initiate a Medication Practices Workgroup. Membership to include: Martie Drinan, Lupe Ayala, Mary Ann O'Donnell, Norma Fritsche, Gerald Ko, Alredo Larios, Jeff Kohn, Carol Eisen, M.D.</p>	<p><b>Gerald Ko Paul Arns Martie Drinan</b></p>
<p><b>Outcome Measures</b></p>	<p>If someone is discharged from an inpatient facility that is known to our system that is a MediCal Recipient or Fee For Service psychiatric hospitals and they are subsequently seen by one of our agencies, we would have that information.</p>		<p><b>Norma Fritsche</b></p>

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<b>Intranet Update</b>	Meeting Calendar: Each Service Area has a link on the intranet site that will be exclusive for that Services Area. It will be available for providers on the internet at a later date.	Wendy Turner is the contact person, if you need to add or delete anything on the intranet. She will be updating SA intranet information and posting all meeting minutes.	<b>Wendy Turner</b>
	QA Section on the site.	Norma Fritsche and Wendy Turner will get together to decide how to place the FAQ's on the intranet.	<b>Norma Fritsche and Wendy Turner</b>
<b>Intranet Update</b>	Intranet Path to QI & QA: * On Desktop, Double click on Internet Explorer * On the top middle portion of the page click on <u>Coming Soon-DMH Portal</u> . * On the left hand side of the DMH Web screen, click <u>DMH Web Sites</u> . * Scroll down this page to locate <u>Program Support Bureau Link</u> , Click this link. * On the right hand side is where you will access the QI and QA site pages.	Website will be available by February 1, 2008.	<b>Wendy Turner</b>
<b>Auditor Controller's Office</b>	DMH Contract Compliance Review Reports Fiscal Year 2007-08 are being reviewed for QI issues. Cumulative reporting will be provided by Wendy.	Wendy will post these documents on the intranet.	<b>Wendy Turner</b>

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<b>Countywide QI System</b>	Annual QI Evaluation Report: We are finalizing the 2007-2008 report, and the goals for 2008.	The final report will be distributed to the State, the EMT and other stakeholders. Jeff Kohn will need to receive feedback and any needed changes on the Evaluation Report Draft by a week from today. He will make the changes and have final draft.	<b>Jeff Kohn Martie Drinan</b>
<b>Countywide QI System</b>	<b>Service Delivery Capacity System:</b> * The goal for 2007 focused on expansion of the number of FSP slots for each age group. The number of authorized slots, rather than the number of enrollees, have been collected for the year, and are compared to the target numbers in a table in the report. * For the focus on 2008 goals we will be gathering measurable data for Cultural Competency and penetration rates. * We will also focus on the final recommendations and the "Next Steps" of the Latino Access Study that had been recently completed.		<b>Jeff Kohn</b>

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	<p>Beneficiary Satisfaction:</p> <ul style="list-style-type: none"> <li>* We are looking for hard data and focusing on those areas that we can impact and improve upon when able to compare for the purposes of QI.</li> <li>* Focused on MHSIP Surveys which is now incorporated in Performance Based Contract Outcomes. This will continue as a goal for QI, as well as a baseline measurement for the Performance Contracting through 2008.</li> <li>* The language will be identical to the measures used by the workgroup for the Performance Outcomes.</li> </ul> <p>Clinical Issues:</p> <ul style="list-style-type: none"> <li>* We will be incorporating areas of QI in medication practices; this is an area in which we need to meet further.</li> </ul> <p>Coordination/Continuity of Care:</p> <ul style="list-style-type: none"> <li>* Performance Contracting</li> <li>* Setting further Goals for QI.</li> </ul>		<p align="center"><b>Jeff Kohn</b></p>
<p align="center"><b>Countywide QI System</b></p>	<p><b>Service Accessibility:</b></p> <ul style="list-style-type: none"> <li>* We are focusing on the data that we have been collecting, in regards to the Access 24/7 toll free lines and PMRT response rates.</li> <li>* We are focusing on actual numbers and trending.</li> </ul>		<p align="center"><b>Jeff Kohn</b></p>
	<p>Next meeting Agenda: There continues to be conflict with meeting dates/times for QI and Dashboard.</p>		<p align="center"><b>Martie Drinan</b></p>

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Handouts	<ul style="list-style-type: none"> <li>* Agenda</li> <li>* LACD of Auditor-Controller Countywide Contract Monitoring Division DMH Contract Compliance Review Fiscal Year 2006-07</li> <li>* Departmental QIC Meeting 2008 Calendar</li> <li>* Letter from Dr. Southard (Reference: File Code CMS 2261-P Proposed Medicaid Medicare Rehabilitation Rule Changes)</li> </ul>		
Next Meeting	<p><b>February 11, 2008</b>  <b>10:30am - 12:00 pm</b>  <b>TQID-Planning</b>  <b>695 S. Vermont Avenue</b>  <b>15th Floor Conference room</b>  <b>Los Angeles, CA 90020</b></p>		

Respectfully submitted

*Martha Drinan*  
 Martha Drinan, RN, MN, APRN