

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

**Departmental Quality Improvement Council Meeting**

**A G E N D A**

**July 14, 2008**

**9:00 a.m.**

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

**Martie Drinan, RN, MN, APRN, Chairperson**

**Carol Eisen, M.D., Co-Chair**

<b>I</b>	<b>9:00 - 9:10</b>	<b>INTRODUCTIONS &amp; REVIEW OF MINUTES</b>	QIC Membership
<b>II</b>	<b>9:10 - 9:30</b>	<b>SA QIC REPORTS &amp; COUNTYWIDE CHILDREN'S QIC REPORT</b>	SA QIC Chair / Co-Chair
<b>III</b>	<b>9:30 - 9:50</b>	<b>CULTURAL COMPETENCY</b> <ul style="list-style-type: none"> <li>➤ Cultural Competency Advisory Sub-Committee</li> <li>➤ Penetration &amp; Retention Rates, and SharePoint Update</li> <li>➤ Web Links</li> </ul>	Tara Yaralian Vandana Joshi Wendy Turner
<b>IV</b>	<b>9:50 - 10:00</b>	<b>PIP STATUS REPORT</b> <ul style="list-style-type: none"> <li>➤ QI/PIP Sub-Committee(s)</li> <li>➤ EPSDT PIP</li> <li>➤ Rehospitalization Cohort 2 PIP</li> </ul>	Carol Eisen Ted Wilson
<b>V</b>	<b>10:00- 10:20</b>	1.& 2. Service Delivery Capacity / System and Service Accessibility <ul style="list-style-type: none"> <li>➤ CADMH/CIMH – Statewide Training on Data Quality</li> </ul> 3. Beneficiary Satisfaction / Beneficiary Grievances Survey <ul style="list-style-type: none"> <li>➤ State Performance Outcomes – Summary Report</li> </ul> 4. Clinical Issues 5. Coordination / Continuity of Care 6. Provider Appeals	QIC Membership  Vandana Joshi  Ted Wilson  Carol Eisen
<b>VI</b>	<b>10:20- 10:25</b>	<b>OTHER</b>	
<b>VII</b>	<b>10:25 -10:30</b>	<b>ANNOUNCEMENTS</b>	
Proposed Agenda Items for Next Meeting			

**Next Meeting**

**August 11, 2008**

**9:00 a.m. - 10:30 a.m.**

**550 S. Vermont Ave.**

**10<sup>th</sup> Floor Conference Room**

**Los Angeles, CA 90020**

**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH  
QUALITY IMPROVEMENT COUNCIL (QIC) Minutes**

<b>Type of Meeting</b>	<b>Departmental Quality Improvement Council</b>		<b>Date</b>	<b>July 14, 2008</b>	
<b>Place</b>	<b>550 S. Vermont Ave., 10<sup>th</sup> Floor</b>		<b>Start Time:</b>	<b>9:00 a.m.</b>	
<b>Chairperson</b>	<b>Martha Drinan, RN, MN, APRN</b>		<b>End Time:</b>	<b>10:30 a.m.</b>	
<b>Members Present</b>	Anahid Assatourian; Sharon Chiappe; Lori W. Dobbs; Martha Drinan; Carol Eisen; Gassia Ekizian; Rocio Ortiz Gonzales; Sylvia Guerrero; Rebecca Hall; Scott Hanada; Rashied Jibri; Monika Johnson; Vandana Joshi; Jeff Kohn; Gloria Lara-Vasquez; Ann Lee; Bertrand Levesque; Robert Levine; Vivian Matsushige; Alex Medina; Kumar Menon; Terra Mulcahy; Mary Ann O'Donnell; Teresa Quijano; Kimber Salvagio; Linda Settemire; Wendy Turner; Ted Wilson; Tara Yaraian				
<b>Excused Members</b>	Marjie Borjon; Wayland Chan; Lisa Delmas; Martha Drinan; Nancy Kless; Norma Fritsche; Eduardo Vega; Elizabeth Fitzgerald; Jerry Lubin; Naga Kasarabada; Susan Crimin				
<b>Absent Members</b>	Paul Arns; Lupe Ayala; Marlene Campbell; Josh Ciszek; Cindy Coons; Peter DeGyartas; Kimberly Floyd;; Michelle Hernandez; Adele Kelso; Gerald Ko; Jaime Nahman; Jim Randall; Luann Rollens; Leslie Shrager; Mona Sparks; Laquita Suggs; Day Sukeda; Sue Sundareson; Albert Thompson; Julie Valdez; Larry Wicker; Jessica Wilkins; Aelyen Yoon				
<b>Agenda Item &amp; Presenter</b>	<b>Discussion and Findings</b>		<b>Decisions, Recommendations, Actions, &amp; Scheduled Tasks</b>		
<b>Call to Order &amp; Introductions</b>	Dr. Carol Eisen called the meeting to order at 9:00 a.m. in Martie Drinan's absence.		Introductions were made.		
<b>Review of Minutes</b>	The minutes of June 9, 2008 were reviewed and approved.		Corrections were made.		
			<b>Person Responsible &amp; Due Date</b>	<b>QIC Membership</b>	

Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
<p><b>A QIC Liaison Reports</b></p>	<p><b>SA 1:</b> No report.</p> <p>A flyer, registration form, and invitation letter regarding the Antelope Valley 2008 Youth Summit were faxed to our office, and copies were distributed to the participants.</p> <p><b>SA 2:</b> SA 2 Chair, Vivian Matsushige (Children's) reported that they have two QIC meetings that meet alternately; one for children and one for adults. Their meeting last month was for children. Jim Price from The Mental Health Advocacy came and spoke to the children's providers about consent and releasing information for foster children. The providers found it to be very helpful. The issues discussed have been on-going for years. There were many legal issues discussed with no definitive answers, such as: custody issues, parent's rights, divorced parent's rights, etc.</p> <p><b>SA 3:</b> Bertrand Levesque, SA 3 Chair, reported that their QIC Meeting last month was well-attended. The Auditor-Controllers have been invited to come to their next QIC meeting to present on how audits are done and what they look for. This presentation was arranged because some of the providers have brought up questions regarding different standards from one controller to another.</p>	<p>N/A</p> <p>Carol encouraged the participants to register &amp; attend this event to be held on August 1, 2008.</p> <p>N/A</p> <p>Bertrand informed the members that Rocio Ortiz Gonzalez will be replacing Reina Vidaurri as their co-chair and will be attending their QIC meetings.</p>	<p>N/A</p> <p>K. Floyde</p> <p>V. Matsushige</p> <p>B. Levesque</p>

Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
<p><b>SA QIC Liaison Reports Cont'd.</b></p>	<p><b>SA 4:</b> Anahid Assatourian, SA 4 QIC Chair, reported that Dianne Guillory presented on "Psychologist's Labor" at their last QIC meeting. On May 27, they attended Documentation Training, which was their QIC Project for last year.</p> <p><b>SA 5:</b> Monika Johnson, SA 5 QIC Chair, reported that they have a QIC meeting every other month. Their last QIC meeting was held on July 1. People are still needed for the Cultural Competency Subcommittee. There was a brief discussion on the Change of Provider forms, and a lot of QA-related questions were discussed.</p> <p><b>SA 6:</b> Rashied Jibri, SA 6 QIC Chair, reported that their last meeting was held on July 18. They are working to finalize their QIC project on SFPR (Single Fixed Point of Responsibilities). Their guest speaker was Diane Guillory, who presented on Psychologists' Labor. They also reviewed and discussed the summary report on domain test calls.</p> <p><b>SA 7:</b> No report.</p> <p><b>SA 8:</b> The new SA 8 QIC Chair is Scott Hanada, effective September, 2008. Service Area 8 is looking for a new co-chair from the Contractors Program. They will not be meeting in August.</p> <p><b>Countywide Children's QIC:</b> No report.</p>	<p>The next QIC meeting for Service Area 4 will be held on September 16, 2008. (dark in August)</p> <p>SA 5 members voted on a QI project: "Client Coordination Plan", which explains the principles of Cultural Competency. There will be on-going discussions in QI meetings on this project.</p> <p>N/A</p> <p>N/A</p> <p>N/A</p> <p>N/A</p>	<p>A. Assatourian</p> <p>M. Johnson</p> <p>R. Jibri</p> <p>N/A</p> <p>S. Hanada</p> <p>N/A</p>

Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
<p><b>Cultural Competency</b></p>	<p>Tara Yaralian reported that the Cultural Competency Advisory Sub-Committee will be meeting this Wednesday, July 16<sup>th</sup> from 10:00 a.m. to 11:00 a.m. at 695 South Vermont on the 15<sup>th</sup> Floor in the Training Conference Room. They are still looking for individuals who are interested in becoming members of the Cultural Competency Advisory Sub-Committee. It is now a State requirement. Anyone interested in becoming a member should email Rebecca Hall.</p>	<p>Sylvia Guerrero volunteered to become a member of the Cultural Competency Advisory Sub-Committee.</p>	<p>T. Yaralian</p>
<p><b>Penetration &amp; Retention Rates; SharePoint Update</b></p>	<p>Vandana Joshi, Program Head of the Data Unit, distributed handouts regarding prevalence rates for Serious Mental Illness. The rates were identified as follows: 1) Total Population by Supervisory District, and 2) Total Population by service area. She also provided spreadsheets with data showing percentages of clients served during the Fiscal Year of 2006 – 2007 by ethnicity, service areas, and languages spoken in L.A. County. Vandana was not able to give a SharePoint update, because she had not received the necessary MHSA data. She is planning to schedule dates for detailed training at the Service Areas in order to train the members on navigating in SharePoint and the Countywide web pages. She should be finished by August or September, 2008. She is still waiting for poverty data. Vandana informed the group that it is better to see data at the provider level. She should have</p>	<p>The data spreadsheets were referenced at the bottom as being updated for the fiscal year of 2005 – 2006. However, the data was actually updated for the fiscal year of 2006 - 2007.</p>	<p>V. Joshi</p>

Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
<p><b>Penetration &amp; Retention Rates; SharePoint Update Cont'd.</b></p>	<p>the penetration data available by the next meeting. Vandana gave a brief overview of how to get to the Provider Directory and various spreadsheets.</p>	<p>A request was made to include a list of providers in a SharePoint webpage.</p>	<p>V. Joshi</p>
<p><b>Web Links</b></p>	<p>Wendy Turner gave a brief overview of the Website she is working on in the Learning Net. She demonstrated how to get to the Program Support Bureau, and how to access each Service Area webpage in Quality Improvement. She discussed web pages containing the telephone directory, a master calendar where all QIC Meetings are scheduled, and various links for announcements, minutes, etc. She is working to make it easier for the staff to communicate with each other and share information. Service providers and outside people will also be able to access certain areas. You should be able to access it in 3 to 4 weeks. She encouraged the Service Area QIC Chairs to email their announcements, minutes, and agendas of their meetings to her so they can be posted on their web page. If you have a lot of information to send, you will need a digital sender. Wendy provided the Internet address <a href="http://psbqi.dmh.lacounty.gov">http://psbqi.dmh.lacounty.gov</a> to get into the system. She will be sending an announcement when it is available to be accessed.</p>	<p>Wendy encouraged the group to call or email her with any updated information to be downloaded into the system. Wendy's email address is: <a href="mailto:wendyturner@dmh.lacounty.gov">wendyturner@dmh.lacounty.gov</a> Her phone number is (213) 251-6862.</p>	<p>W. Turner</p>

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<p><b>PIP Status Report</b></p>	<p><b>QI / PIP Sub-Committee(s):</b></p> <p>Carol Eisen reported there was no update regarding the QI PIP Sub-Committee at this time. However, the QI PIP Sub-Committee is moving forward, and an update will be provided at a later time.</p> <p><b>EPSDT PIP / Rehospitalization Cohort 2 PIP:</b></p> <p>Ted Wilson, QI Division, reported that the State has now made the External Quality Review Organization (EQRO) a Medi-Caid requirement. The Federal Government said California has been spending too much money on this program, therefore, the State was given two choices – either lose money or do a PIP. A decision was made to do a PIP. There are three committees working on this at the State level, involving approximately 23 counties: 1) The first committee will focus on study questions such as: What are we going to do? What is it going to look like? What are we going to measure? 2) The second committee will focus on defining a PIP and what the due process is. 3) The third committee will focus on the actual data. We are involved with at least two of these committees. It is in a preliminary stage right now, therefore there is no information to report at this time.</p>	<p>N/A</p> <p>Starting this year, the State of California will enforce a mandatory Performance Improvement Project (PIP) for all counties for the EPSDT programs.</p>	<p>C. Eisen</p> <p>T. Wilson</p>

<b>Agenda Item &amp; Presenter</b>	<b>Discussion &amp; Findings</b>	<b>Decisions, Recommendations, Actions, &amp; Scheduled Tasks</b>	<b>Person Responsible &amp; Due Date</b>
<p><b>PIP Status Report Cont'd.</b></p>	<p>There was a PIP that was done for small counties in California regarding hospitalization and re-hospitalization of Medi-Cal clients. Since then, it has been expanded to include all clients, not just Medi-Cal clients. Los Angeles County will be a part of the second PIP which is a Cohort 2 PIP. They are going to be looking at clients who have been hospitalized for the first time, and also clients who have been hospitalized within 30 days, 60 days, and 90 days or more. They have a road map available of the PIP that shows you the measures they are looking at. More information will be provided as it materializes.</p>	<p>N/A</p>	<p>T. Wilson</p>
<p><b>Service Delivery Capacity / System &amp; Service Accessibility</b></p>	<p>Vandana Joshi, Program Head of the Data Unit, distributed a handout she received in a training in June 2008, entitled "California Department of Mental Health Data Quality: State and National Perspectives". This was a Statewide training on the quality of data from Intake to Outcome and it was based on a survey conducted by UCLA. Outcome measures, applications, how to improve quality, and PIPs were all discussed in this training. Los Angeles County rated the highest among all counties. Outcome measures for FSP data, diagnosis data, and billing data were discussed. They were very skeptical on diagnosis data. However, they found billing data to be the most accurate.</p>	<p>N/A</p>	<p>V. Joshi</p>

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<p><b>Service Delivery Capacity / System &amp; Service Accessibility</b></p>	<p>The consensus was to break down the analysis of the data by service areas. They looked at data broken down by age, and were trying to determine if clinicians were well-trained in this area. Carol asked if they thought the diagnosis was unreliable between specific codes or general diagnosis. They were specifying a general diagnosis.</p>	<p>San Diego County was rated as "very good" in Quality Control.</p>	<p>V. Joshi</p>
<p><b>Beneficiary Satisfaction / Beneficiary Grievances Survey: State Performance Outcomes-Summary Report</b></p>	<p>Ted Wilson, QI Division, distributed the General Report for the November 2007 Survey Period. It has been finalized and distributed to all the providers. Most of the information, regarding the outcome measures, is the same. However, the new requirement for contracting may change. We will not use information from the November and May survey reports because the information will not be appropriate. They are basing all the outcome measures from the reports made after May 2008 and forward. We will still have the preliminary report, and there will be a second report regarding Performance-Based Outcome Measures. The third report will focus on trending over time, looking at the response rates, and then developing an item analysis by age groups. There has been a significant increase in the return rate of surveys. All providers are to be a part of this process. We have received approximately 10,000 field-based surveys.</p>	<p>N/A</p>	<p>T. Wilson</p>

Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
<p><b>Beneficiary Satisfaction / Beneficiary Grievances Survey: State Performance Outcomes-Summary Report Cont'd.</b></p>	<p>The information for the May survey will be completed soon. Ten to twenty-five percent of the providers in each service area did not include their four-digit provider number on their surveys for baseline measures. Therefore, they will not receive information. The Steering Committee is working to get the results.</p>	<p>N/A</p>	<p>T. Wilson</p>
<p><b>Clinical Issues</b></p>	<p>Carol reported that this year the Office of the Medical Director has started a Peer Review Process for the physicians. During the last couple of years, they have placed some Supervising Psychiatrists in the larger clinics that have enabled the process to go forward. Mary Ann O'Donnell works on policies in the area of Peer Review for the physicians. Chart reviews are involved, and they are choosing important indicators of quality, and focusing on one particular indicator at a time. They started out with glucose monitoring. Glucose monitoring is an important part of prescribing newer anti-psychotics. Glucose monitoring is important and is recommended to avert negative outcomes. They are re-doing the glucose monitoring indicator, before moving on to other outcomes.</p> <p>Mary Ann O'Donnell, Risk Manager, reported that during the first month, they looked at the system in the clinics to see whether glucose monitoring was being done. The health monitoring parameter requires a record of this every year. The new medication services forms will make it easier to monitor.</p>	<p>N/A</p>	<p>C. Eisen</p>

<b>Agenda Item &amp; Presenter</b>	<b>Discussion &amp; Findings</b>	<b>Decisions, Recommendations, Actions, &amp; Scheduled Tasks</b>	<b>Person Responsible &amp; Due Date</b>
<b>Clinical Issues Cont'd.</b>	<p>They are also working to improve some of the structural problems and to raise the level of awareness among the psychiatrists about the parameters. The parameters are on the Internet and are now equal to policy .</p> <p>A suggestion was made that a case presentation regarding this review process may be a good idea to present at our QIC meetings. Carol said everyone has local supervising psychiatrists who could come and talk about local experiences. This would also benefit the contract providers who attend the meetings. Carol &amp; Mary Ann will discuss this idea further.</p> <p>Some of the problems are at the individual level, some at the local level, and some are system-wide. If something is found, then we would go through the normal processes. We are going in the direction of electronic medical record. Glucose monitoring is an important measure and there has been litigation. The process is more quality than compliance. There was also a brief discussion regarding locating the parameters, policies, and guidelines on the web site.</p>	<p>N/A</p> <p>The new medication forms will be covered in the next meeting and include a lot more structure, specifically for the new nurse practitioners.</p>	<p>M. A. O'Donnell</p> <p>C. Eisen &amp; M.A. O'Donnell</p>

Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, & Scheduled Tasks	Person Responsible & Due Date
<p><b>Comments / Announcements</b></p>	<p>None reported.</p>	<p>N/A</p>	<p>N/A</p>
<p><b>Handouts</b></p>	<ul style="list-style-type: none"> <li>➤ Flyer, Invitation Letter, &amp; Registration Form for the Antelope Valley 2008 Youth Summit</li> <li>➤ Accessibility Domain for Test Calls Summary Report</li> <li>➤ State Performance Outcomes - Final Summary Report by Service Area Nov. 2007</li> <li>➤ California Department of Mental Health Data Quality: State and National Perspectives</li> <li>➤ Spreadsheets containing data on clients served during 2006 – 2007 by ethnicity and languages spoken by Service Areas in L.A. County</li> <li>➤ DMH 2007 Prevalence Rates for Serious Mental Illness – grouped by total population &amp; age</li> </ul>	<p>N/A</p>	<p>N/A</p>

<b>Agenda Item &amp; Presenter</b>	<b>Discussion &amp; Findings</b>	<b>Decisions, Recommendations, &amp; Scheduled Tasks</b>	<b>Person Responsible &amp; Due Date</b>
<b>Adjournment</b>	The meeting adjourned at 10:29 a.m.	N/A	N/A
<b>Next Meeting</b>	August 11, 2008 9:00 a.m. – 10:30 a.m. 550 South Vermont Avenue 10 <sup>th</sup> Floor Conference Room	N/A	N/A

Respectfully Submitted,

The minutes were reviewed and final approval was authorized by Carol Eisen, M.D., who chaired the meeting. Therefore, Dr. Carol Eisen gave permission for her name to be printed in lieu of her signature.

Carol Eisen, M.D., Co-Chair