

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

Departmental Quality Improvement Council Meeting

A G E N D A

June 13, 2016
9:00 – 10:30 a.m.
550 S. Vermont Ave., 10th Floor Conference Room
Los Angeles, CA 90020

Naga Kasarabada, Ph.D., Chair

Karen Lee, M.D./Carol Eisen, M.D., Co-Chairs

I	9:00 - 9:05	Introductions & Review of Minutes	QIC Members
II	9:05 – 9:40	SA QIC Reports & Countywide Children’s QIC Report	QIC Members
III	9:40 – 9:50	Clinical Quality Improvement ➤ OMD Report	K. Lee M. O’Donnell
IV	9:50 – 10:05	Patients’ Rights Office ➤ Change of Provider Request Log	Anna Bruce
V	10:05 – 10:10	Cultural Competency Updates	M. Parada Ward
VI	10:10 – 10:15	Policy Update – Office of Compliance	R. Faveau
VII	10:15 – 10:25	➤ Test Calls Quarterly Update ➤ EQRO Draft Report ➤ SA QI Project FY 16-17	N. Kasarabada
VIII	10:25 – 10:30	MHSIP Survey May 2016	T. Jones
		Announcements:	

Next Meeting

July 11, 2016
9:00 – 10:30 a.m.
550 S. Vermont Ave. 10th Floor Conference Room
Los Angeles, CA 90020

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

Type of Meeting	Departmental Quality Improvement Council	Date:	June 13, 2016	
Place	550 S. Vermont Ave., 10th Floor Conf. Rm.	Start Time:	9:00 a.m.	
Chair	Naga Kasarabada, Ph.D.	End Time:	10:30 a.m.	
Co-Chair	Carol Eisen, M.D./Karen Lee, M.D.			
Members Present	Anna Bruce; Antonio Banuelos; Aprill Baker; Barbara Paradise; David Tavlin; Debra Mahoney; Elizabeth Gildemontes; Emilia Ramos; Gassia Ekizian; Jamie Walker; Karen Lee; Kary To; Kimber Salvaggio; Leticia Ximenez; Lisa Harvey; LyNetta Shonibare; Margaret Faye; Maria Gonzalez; Martin Hernandez; Mary Ann O'Donnell; Michele Munde; Michelle Rittel; Mirtala Parada Ward; Misty Aranoff; Monika Johnson; Randolph Faveau; Sean Dennis; Tonia Amos Jones			
Excused/Absent Members	Ann Lee; Anna Levina; Barbara C. Engleman; Bertrand Levesque; Carol Eisen; Caesar Moreno; Christina Kubojiri; Debi Berzon-Leitelt; Elizabeth Dandino; Greg Tchakmakjian; Helena Ditko; Michael Tredinnick; Sandra Chang-Ptasinski; Vandana Joshi			
Agenda Item & Presenter	Discussion and Findings	Decisions, Recommendations, Actions, & Scheduled Tasks		Person Responsible
Call to Order & Introductions	The meeting was called to order at 9:00 a.m.	QIC members attended this meeting.		Dr. Kasarabada
Review of Minutes	The May minutes were reviewed.	Minutes were reviewed and approved as noted.		QIC Membership

Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible
<p>SA QIC's Reports & Countywide Children's QIC Report</p>	<p>SA 1: State Performance Outcomes Survey training was conducted by Dr. Joshi and Dr. Shonibare. QIC members had a discussion on field based data missing. Information from previous meeting was discussed.</p> <p>SA 2: Ms. Viade presented on Co-occurring Disorders with intellectual disabilities. Information from previous Departmental QIC meeting was discussed. MHSIP surveys were completed and collected. QIC members had a brief discussion on treatment retention that will continue at our next meeting.</p> <p>SA 2 Children: Dark in last month.</p> <p>SA 3: Ms. Faye reported that QIC members discussed and reviewed updates on QI/QA. Test Calls was also part of the discussion. Some questions regarding Cultural Competence Plan Requirements (CCPR) were discussed as well.</p> <p>SA 4: Dr. To reported that the MHSIP surveys were completed in May 2016. They were collected and tallied up with submission on June 2, 2016. Test calls are due in June 2016. Dr. Jones discussed this at the May 2016 meeting. QIC members raised questions regarding CC requirements.</p> <p>SA 5: Information from previous Departmental QIC meeting was discussed. QIC members had a discussion with providers regarding the recruitment of consumers attending the SA QIC meetings. Members discussed and provided suggestions/ideas on how to develop a QI project that is of interest to consumers. Presentations will be held in the next SA 5 QIC.</p>	<p>Next meeting: July 5, 2016.</p> <p>Next meeting: July 21, 2016.</p> <p>Next meeting: June 16, 2016.</p> <p>Next meeting: June 15, 2016.</p> <p>Next meeting: June 21, 2016. Ms. Parada Ward sent the Cultural Competency Plan Requirements (CCPR) link to all QIC members.</p> <p>Next meeting: July 12, 2016.</p>	<p>B. Paradise</p> <p>K. Salvaggio</p> <p>M. Rittell</p> <p>M. Faye</p> <p>K. To</p> <p>M. Johnson</p>

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<p>SA QIC's Reports & Countywide Children's QIC Report</p>	<p>SA 6: Information from previous meeting was disseminated. Ms. Granston from QID presented on VANS. CEO's of contract programs provided a list of providers that were not on VANS. Providers discussed about wait list. Also MHSIP surveys were collected.</p> <p>SA 7: Information from previous Departmental QIC meeting was disseminated. Dr. Jones provided a thorough update on QI Work Plan Evaluation and the QI Work Plan Goals. The Spring 2016 MHSIP surveys were collected, reviewed and tallied. There was a very good response.</p> <p>SA 8: Ms. Munde announced that SA 8 is getting ready to go live on VANS QIC members had a demonstration at their QIC meeting on May.</p> <p>Countywide Children's: During the May 12th Countywide Children's QIC, Mr. Hernandez provided an update on Patient Rights. Ms.Cano and Ms. Pak provided information on Medi-Cal Certification. Ms. Parada Ward presented information on the revised Policy No. 200.03 and DHCS Cultural Competency Training Requirements for both Directly Operated and Legal Entities Providers.</p>	<p>June 23, 2016.</p> <p>Next meeting: June 21, 2016.</p> <p>Next meeting: June 15, 2016.</p> <p>Next meeting: August 11, 2016.</p>	<p>A. Baker</p> <p>A. Banuelos</p> <p>M. Munde</p> <p>D. Mahoney</p>
<p>Clinical Quality Improvement OMD Report</p>	<p>The DMH psychiatrists will be using an email platform to consult with the Primary Care doctors in DHS. It does not involve any emails going to the clients. This is voluntary for the psychiatrists and can be a resource if they want to manage simple medical issues for the clients who are indigent and do not have primary care doctors.</p>		<p>K. Lee</p>

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Clinical Quality Improvement OMD Report cont.	<p>Ms. O'Donnell discussed the recently signed Access to Care Policy. This policy replaces the former DMH Policy 202.43 Scheduling Initial Clinical Appointments and Documentation and DMH Policy 302.09 Scheduling Initial Medication Appointments. In addition, the policy references a re-naming of the current DMH policy 302.12 Walk-In Services to the title, "Provision of Services Without a Scheduled Appointment." The change to 302.12 is currently in the executive approval/signature phase of review.</p>		M. Ann O'Donnell
Patients' Rights Office (PRO)	<p>Ms. Bruce was present at the meeting to talk about auto confirmation for Change of Provider Request mail box. She also asked QIC Chairs to remind providers that July 10th is the deadline to submit the change of provider request log.</p> <p>SA QIC Chairs expressed concerns about errors in reports generated for COP logs. Ms. Bruce agreed to work with QID and SA QIC Chairs to address this matter. Ms. Bruce also stated that there has been change in staffing who oversee this report in the past year and currently they are making efforts to address these issues.</p>	<p>A report will be sent by the end of June.</p> <p>SA QIC Chairs and PRO agreed that a current year to date report from PRO would be helpful for SA QIC Chairs to review provider status on the COP logs. This report will first be sent by Ms. Walker and at a later time, the quarterly report for April, May, and June will be sent for their review. The goal is to have an accurate report in time for the State by the October 1, 2016 FY report deadline.</p>	<p>A. Bruce</p> <p>N. Kasarabada</p>
Cultural Competency Committee Updates (CCC)	<p>Ms. Parada Ward provided the Cultural Competency Unit's Update. On May 26, the Cultural Competency Committee facilitated a Cultural Competency Workshop at the Mental Health Spirituality Conference. Dr. Leticia Ximenez, who is one of the Co-chairs of CCC, was one of the facilitators of this workshop.</p>		M. Parada Ward

Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible
Cultural Competency Committee Updates (CCC) Cont.	<p>The name of the workshop was, "Looking Over the Horizon". For this CCC Workshop, there were four members of the CCC who served as panelists. They talked about the role of spirituality from a cultural perspective. At the Mental Health Spirituality Conference there were also several Keynote speakers, which included: His Holiness the Drikung Kyabgon Chetsang from India, Laurence Freeman OSB Christian Meditation and Dr. Southard, USC School of Social Work.</p> <p>On June 9, 2016, the LGBTQI2-S UsCC Liaison facilitated a 30 minute presentation at the Skid Row Mental Health Clergy Round Table meeting. The purpose of the presentation was to increase Awareness of LGBTQ mental health issues among the clergy. Overall, the presentation was well received.</p>		M. Parada Ward
Policy Update – Office of Compliance	Mr. Faveau from Compliance Privacy and Audit Services Bureau provided an update on policies and reviewed the handout.	Mr. Faveau clarified that the Access to Care Policy has been posted on the website.	R. Faveau
Test Calls Quarterly Update	Dr. Kasarabada reviewed the test calls quarterly update that was sent to the State for the first quarter (Jan, February, and March) of this Calendar Year (CY). She noted that the results are positive in general, but areas identified for improvement include logging of calls, and information given for beneficiary grievance calls.	ACCESS Center management has been notified of these findings to address this area.	N. Kasarabada

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EQRO Draft Report	<p>Dr. Kasarabada informed QIC members that the EQRO draft report was received and the feedback response form has been sent to all leads. The QID deadline for submission of the feedback form is June 16, 2016.</p> <p>Dr. Kasarabada also highlighted findings from this report. Overall, the report was very positive and both Performance Improvement Projects (PIPs) received high ratings – Clinical (93%) and Non-Clinical (100%). Most of the key component factors rated were fully met under the domains of Access, Timeliness, and Quality of Care. DMH is currently working on those areas that were “partially met” or “not met”.</p>	<p>SA QIC Chairs were asked to review the report and send their responses.</p> <p>She encouraged all QIC members to review the Conclusion, Strengths, and Opportunities section listed towards the end of this report. She recommended SA QIC Chairs to include SA QIC agenda items focusing on timeliness and PIPs per the recommendations in this report. The final report will be distributed via email once received.</p>	<p>N. Kasarabada</p> <p>N. Kasarabada</p>
SA QI Project FY 16-17	<p>Dr. Kasarabada asked SA QIC Chairs to consider potential areas for the Service Area project for next year. Moving forward, the SA project will be presented for the Fiscal Year (FY). She highlighted some potential ideas from previous QIC discussions such as the monitoring of FSP programs for 24/7 response, consumers’ access to the 24/7 hotline number, areas identified by EQRO such as field safety training and cultural competence and customer service training.</p>	<p>She stated that at the July QIC meeting, there will be a further discussion on this topic to select the SA project to be implemented for FY 16-17.</p>	<p>N. Kasarabada</p>

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MHSIP Survey May 2016	<p>Dr. Jones thanked the QIC Chairs and Co-Chairs for their participation in the Spring 2016 MHSIP Survey process. Approximately 9442 surveys were collected. Once a vendor is selected, a Purchase Order (PO) will be issued, a pick-up date will be finalized, and the surveys will be scanned.</p> <p>SA QIC Chairs expressed that providers with field based services continue to express the need for this survey to be administered to consumers receiving field based services. Currently, this survey is not administered in the field settings as there is a potential for bias and confidentiality concerns when the survey completed is returned by the consumer to the clinician in the field providing this service. Alternate options such as handing a self-stamped self-addressed envelope, using kiosks or iPads where the consumer can complete the survey online and having a second staff accompany the clinician who can receive the completed survey were discussed. It was concluded that due to the low response rates, having consumers mail surveys is not an efficient process.</p>	<p>Dr. Kasarabada will explore the option of the kiosk/iPad for completing this survey with the Chief Information Office Bureau to ensure that the surveys are completed in a HIPAA compliant manner and can be tracked back to a database for reporting purposes.</p>	<p>T. Jones</p> <p>N. Kasarabada</p>
Handouts:	<ul style="list-style-type: none"> ➤ 24/7 Test Call Quarterly Update Report Form ➤ Policy/Procedure Update June 13, 2016 		

Respectfully Submitted,

Naga Kasarabada, Ph.D.