LOS ANGELES COUNTY- DEPARTMENT OF MENTAL HEALTH
Service Area II Program Administration

Adult Quality Improvement Committee Meeting
Kimber Salvaggio, SA 2 Adult QIC Chair
July 16, 2015
San Fernando Mental Health Center
10:00 am-12:00 pm

Agenda

Welcome- Introductions & Agency Updates	All

Quality Improvement

Cultural Competency Report (LGBTQIA)	Sandra Chang Ptasinski
Clinical Quality Improvement	Kimber
Meaningful Use	
New Parameters*	
Safety Intelligence Update	
Policy Updates*	
Announcements	Kimber/All
Field Services Informing Materials Presentation***	Kimber

Quality Assurance

Announcements	All/Kimber
Audits	
Initial Rx Appt Policy	
State DHCS Updates	Kimber
DSM/ ICD 10 Update	
1915 B Waiver Update	
Documentation Trainings*	Kimber
QA Policy Updates & Technical Asst	Kimber
Draft of CFB 15-07*	
Meaningful Use	

Other

How will this information be disseminated in your agency	All
Future Agenda Items & Announcements & Adjournment	All

Handout*
Hard Copy Sample/Email Link**
Sample Provided***

Next Meeting for SA 2 Adult QIC: September 17, 2015 at 10-12 pm

COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
Service Area 2 Adult
QUALITY IMPROVEMENT COUNCIL (QIC) Minutes

Type of Meeting	**Service Area 2 Adult Quality Improvement Committee**	**Date:**	**May 21, 2015**
Place	**10605 Balboa Ave 2nd floor Conf.**	**Start Time:**	**10:00 a.m.**
Chair	**Kimber Salvaggio**	**End Time:**	**12 p.m.**
Co-Chair	**None**		
Members Present	Belinda Ankrah – DMH PSB Certification, Bonnie Shayeg – El Dorado, Cecelia Gallerito – DMH – UCSP, Denise Greenspan - Hillview MHC, Dora Escalante – JFS, Gena Schwartz – Topanga West, Gloria Sistos – Tarzana Tx Ctr, Jeanette Baucham – PACS, Jesus Morales – Didi Hirsch, Jonathan Paltrow – DMH SFMHC, Julie Jones – Hillview MHC, Lesli Di Mascio – SFVCMHC, Inc., Lucy Marrero – Child & Family Ctr, Militza Avila – JFS, Ramona Casupang - DMH SB 82, Sabrina Barscheski - DMH SCVMHC, Sara Pineda – ECDA, Sandra Chang-Ptasinski – DMH PSB QID Cultural Competency Unit, Sheila Mulvihill – El Dorado, Sima Baikov – DMH WVMHC		
Absent Members	Allen Pouravanes - DMH PSB QA, Angela Khan - SFVCMHC, Inc., Deanna Park - PACS, James Milner – El Dorado, James Randall- DMH Outreach & Engagement, Ken Bachrach - Tarzana Treatment Center, Michelle Linden – IMCES, Michelle Logvinsky - Topanga West Guest Home, , Stephanie Yamada – PACS, Tiger Doan – APCTC		

Agenda Item & Presenter	**Discussion and Findings**	**Decisions, Recommendations, Actions, & Scheduled Tasks**	**Person Responsible**
Call to Order & Introductions	The meeting was called to order at 10:00 a.m.	Introductions were made.	K. Salvaggio
Review of Minutes	NA	Minutes were reviewed and approved	QIC Membership

Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible
	QUALITY IMPROVEMENT	**QUALITY IMPROVEMENT**	
Cultural Competency Report	Recent UREP Strategies, projects and Outcomes were provided to the group.	.	Sandra Chang-Ptasinski
Provider Directory Updates	Efforts around updating the provider directory continue, hard copy of current directory passed out to make changes		Kimber
QA vs. QI	A discussion around: • Identifying problems, what can be done about it, what objectives for better outcomes? • Structure, process, outcomes • Access is the fourth element added • Systematic problem solving approach, deliberate (part of everything in clinic) continuous – customer focus, process oriented, data driven, all levels • Quality mgmt. – state language • QI as umbrella for QA, UR		All
EQRO Review	• Did well overall but noted the cultural competency committee efforts, easy to reach md or practitioner in SA 7 and 8 • State gets report in 30 days		
Clinical Quality Improvement	Safety Intelligence • Contact Info 213/351-6633 David Crane administrator of safety intelligence		

PRO	• Moved go live date June 1st contractors after that • Posters now avail again – Carol Lewis 213/738-2524 Clewis@lacounty.gov • Fyi to clinics PRO will randomly ask for 15 bene ack forms every 3 months • Discussed difference between grievance and appeal & P & P		
	QUALITY ASSURANCE	**QUALITY ASSURANCE**	
Announcements	This time next year state audit – we could be in the audit period right now!!		
Initial Rx Appts	Policy will be revised again - will include flexibility to give choice to ucc or another agency; then noa e must be issued		
State DHCS Updates	Discussed DSM 5/ ICD 10 proposed solution		
Doc Trainings	Sch'd provided encouraged for new employees and refreshers or training for knowledge gaps with current staff		
QA Technical Asst. • org manual chap 3 tbs	• currently in chap 3 moving to chap 2 because it's a mode 15 • no changes just simplified		

• Tcm documenting in an assessment vs a PN
 	
Audits
	• Tell assessor to be specific about tcm needs for the client
	• What are the mh issues that would impact the client's ability to access community svcs; where to be documented?
	  o Options: #1 pn? No difficult to find
	  o #2 assessment addenda; so where should it go?
	  o See draft form of community functioning eval – not a required form would be placed in assessment section
	  o Codes: if it focuses on part ii access and linkage would be tcm
	  o top part h2015 evaluation of rehab – if doing the entire form use tcm
	  o it could be used in place of addendum so non-clinical staff complete; this would be plan development or assessment; met with clt for the purpose of assessment for the purpose of case mgmt. needs, consultations are for meeting for the purpose of plan development reference clients tx plan
	
	Child & Family & ECDA - Moss Levy		

Announcements:	NONE		
Handouts:	➢ Recent UREP Strategies, Projects & Outcomes ➢ Quality Improvement Ppt from Eydie Dominguez ➢ Policy 105.01 ➢ QAB 13-06 ➢ Policy 202.29		

	➢ P & P Update A/O Amy 7, 2015 ➢ Documentation Training Sch'd Rev Date 5/11/15 ➢ Draft of Community Functioning Evaluation ➢ ICD 10 & DSM 5 Proposal Ppt.
Next Meeting:	**July 16, 2015**

Respectfully Submitted,

Kimber Salvaggio