

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

Adult Quality Improvement Committee Meeting

Kimber Salvaggio, SA 2 Adult QIC Chair

May 19, 2016

San Fernando Mental Health Center

10:00 am-12:00 pm

Agenda

Welcome- Introductions & Agency Updates	All
Quality Improvement	
Presentation*	Lorraine Viade, Psy.D,
PARAMETERS FOR ASSMT &TX OF INDIVIDUALS WITH CID	Supervising Psychologist LAC DMH Metro North, SA 4 Regional Ctr Liaison & Parameter Co-Author
Cultural Competency Report	Sandra Chang Ptasinski, Ph.D. DMH PSB- QID
Clinical Quality Improvement*	Kimber
Policy Updates*	Kimber
Revised Peer Survey 2015*	Kimber/All
Program/Agency Qi Process*	Kimber/All
QI Evaluation Report & QI Work Plan Goals*	Kimber/All
Wrap-up of Clinical and Non-Clinical PIP's	LyNetta Gore, Psy.D. DMH PSB- QID
PRO	Kimber
QI Announcements	All
Quality Assurance	
Audits	All
State DHCS Updates	Kimber/All
Training & Operations	All/Kimber
Documentation Trainings*	
QA Policy Updates & Technical Asst	Kimber
IBHIS Updates*	
QA Announcements	All
Other	
How is this information disseminated in your agency	All
Future Agenda Items & Adjournment	All

Handout*

Next Meeting for SA 2 Adult QIC: July 21, 2016 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 19, 2016
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	Allen Pouravares - DMH PSB QA, Alex Melkumian – Tarzana Tx Ctr, Angela Khan - SFVCMHC, Inc., Denisa Suciuc – DMH WVMHC, Denise Greenspan - Hillview MHC, James Peik – IMCES, Jonathan Paltrow – DMH SFMHC, Lee James Gossett – Didi Hirsch, Julie Jones – Hillview MHC, Lorena Chavez - Child & Family Ctr, LyNetta Gore - DMH PSB Countywide QI, Megan McDonald – Topanga West, Michele Renfrow – SA 2 DMH, Ninoska Fonseca – JFS, Ramona Casupang - DMH SB 82, Sabrina Barscheski - DMH SCVMHC, Sara Pineda – ECDA, Sue Birman – DMH UCSP, Tiger Doan – APCTC		
Absent Members	Belinda Ankrah – DMH PSB Certification, Contadina Palivos – Didi Hirsch, Deanna Park - PACS, Dora Escalante – JFS, El Dorado, Honey Dardashti – Tarzana Tx Ctr, Jesus Morales – Didi Hirsch, Ken Bachrach - Tarzana Treatment Center, Leslie Di Mascio – SFVCMHC, Inc., Lucy Marrero – Child & Family Ctr, Michelle Logvinsky - Topanga West Guest Home, Miliiza Avila – JFS, Sandra Chang-Ptasinski – DMH PSB QID Cultural Competency Unit, Sima Baikov – DMH WVMHC		
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. Dr. LyNetta Gore of the DMH PSB Countywide QI unit was introduced and welcomed by the group.	K. Salvaggio

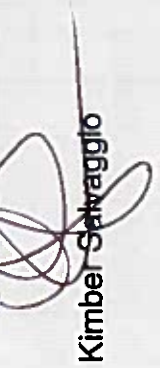
<p>Clinical Quality Improvement</p>	<p>See the handout of Brief Review of New and revised 2015-2016 Clinical Policies and Parameters</p> <p>The final report of the 2013 Peer Review, which was presented to the Executive Management Team in October of 2015, was presented. The review focused on how many records of client receiving psychotropic medications contained a BMI and Outpatient Medication Review (OMR) which listed their current medications. It was determined that 34% of the clients did have a BMI documented, 74% of the records did have a completed OMR and that 71% of the records contained an OMR dated within the past year. Follow-up was done with the clients who did not have one in their record.</p> <p>The Regional Medical Directors or Supervising Psychiatrists have apprised prescribers of the requirement to document a BMI yearly for clients prescribed an antipsychotic medication as stated in DMH 3.7 Parameters For General Health-Related Monitoring in Adults. Additionally, in 2015, the department adopted the Meaningful Use measurement of documenting the BMI for all clients. The parameters were revised in October of 2015 to reflect this measurement.</p>		<p>Provided by Office of the Medical Director staff reported by Kimber</p>
<p>Policy Updates</p> <p>Revised Peer Survey</p>	<p>See April and May handouts</p> <ul style="list-style-type: none"> • 930 surveyed – span Korean languages • No DO staff used to admin • All adult do's 30 from each • Contractor 1 sample from each SA • Overall general responses were positive • See handout • Previous work from family inclusion 		<p>Kimber/All</p> <p>Kimber/All</p>

<p>Program/Agency QI Process</p>	<p>parameter tied to this survey</p> <ul style="list-style-type: none"> • What do the clients think about family inclusion • 50% say yes I want family involved • Willing vs. able <p>See the handout</p>		<p>Kimber/All</p>
<p>QI Evaluation Report & QI Work Plan Goals</p>	<p>Dr. Kasarabada reviewed the summary sheets for the QI Work Plan Goals for CY 2016 and the Evaluation for CY 2015 goals. She highlighted the new goals included this year from the Older Adult System of Care (OASOC) and for the Lesbian Gay Bisexual Transgender Questioning (LGBTQ) trainings. She also explained that 12 of the 19 goals for CY 2015 were met and highlighted the reasons for the goals that were not met. She clarified that for CY 2016, on the Mental Health Statistics Improvement Program (MHSIP) survey related and penetration rate related goals, the goal is specified as a range rather than an exact number based on the trends for the past few years. This change has been made to use a data driven approach based on data trends. See the handout.</p>		<p>Kimber/All</p>
<p>Pt's Rights</p>	<p>Reminder to send logs via email with a 'cc' to Kimber & DMHCOP@dmh.lacounty.gov Put SA 2 in the subject line.</p>		<p>Kimber/All</p>
<p>QI Announcements</p>	<p>None reported.</p>		

	<u>QUALITY ASSURANCE</u>	<u>QUALITY ASSURANCE</u>	Kimber/Allen/All
Audits State DHCS Updates	<p>None in SA 2</p> <p><u>MAA update (for DO's Only)</u></p> <ul style="list-style-type: none"> • MAA implementation plan • Last 3-4 years discussions between state and CMS • CMS concerned over some codes being mis-used over spmp vs. non-spmp • Counties must be able to explain a task performed by an spmp vs non-spmp • Are you using a special expertise as a spmp • More info coming <p><u>Waiver reminder</u></p> <ul style="list-style-type: none"> • Contractors out of compliance <p>None at this time.</p>		
Medi-Cal Certification Section	<p><u>Doc Trainings</u></p> <ul style="list-style-type: none"> • Hard copy of training available dates provided to the group* • all supervisors are strongly encouraged to take the training due to the large number of policy changes in the past several months 		
Training & Operations QA Policy Updates & Technical Asst.	<p><u>Access to Care Policy Revisions and svc request log data</u></p> <ul style="list-style-type: none"> • previously sch'd'ing initial appt with access to rx 		

<p>Upcoming items</p>	<ul style="list-style-type: none"> significant chgs – use srts vs srl, timeframes to respond, log with final dispo, incorporated universal screening, emergent rx needs – concurrent, emergent rx appt – seen at the same time as 1st seen <p><u>Org Manual Update</u></p> <ul style="list-style-type: none"> updating chapter on residential and PHUF svcs – was chap 5 now chap 4 all definitions gone – moved into the chapter no definitions chapter no appendices except included dx revisions in chap 1-3 <p><u>ICC/IHBS expansion update</u></p> <ul style="list-style-type: none"> Katie a and Emily q law suits over So back to std epsdt rules <p><u>IBHIS Updates*</u>:</p> <ul style="list-style-type: none"> See handout sch'd 	
<p>Announcements:</p>	<p>None at this time.</p>	
<p>Handouts:</p>	<ul style="list-style-type: none"> Documentation Training Sch'd Rev Date 05/16 Draft copy of March 2016 SA 2 Adult Mtg Min P & P Updates Rev Dates 04/11/16 & 05/09/16 OMD Parameter 4.18 4.18 Parameter PPT Brief Review of New & Revised 2015/2016 Clinical Policies & Parameters 2015 Consumer Survey Summary of Findings IBHIS Go-Live Sch'd for Contractors (04/11/16) QI Work Plan 2016 	
<p>Next Meeting:</p>	<p>July 21, 2016</p>	

Respectfully Submitted,



Kimber Salvaggio