County of Los Angeles – Department of Mental Health
SA2 Children's QIC and MHSIP Training
April 21, 2016

Agenda

1:30 – 2:15 MHSIP Survey Training for May 2016 Surveys

2:15 – 2:20 Introductions & Announcements

2:20 – 3:25 Report from Departmental QI/QA.....Michelle Rittel

QI

- Clinical QI/OMD Report
- Policy Updates
- PRO
- CCC Updates
- Advanced Spirituality Trainings
- Consumer Participation at QICs
- Provider Directory
- QI Surveys
- CAPP Attendance

QA

- Medi-Cal Certification Section
- State DHCS Updates
- Training & Operations
- MAT Assessments
- Policy and Technical Development

3:25 – 3:30 Suggestions For Next Meeting/ Host for Next Meeting

Contact: Michelle Rittel: Office – (213) 739-5526
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Next Meeting:
Thursday, June 16, 2016
Location: TBA

LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
Service Area 2 Children's QIC Meeting
QUALITY IMPROVEMENT COMMITTEE MINUTES

Type of Meeting	SA 2 Children's QIC	**Date**	April 21, 2016
Place	Pacific Lodge Youth Services	**Start Time**	1:30pm
Chairperson	Michelle Rittel	**End Time**:	3:30pm
Co-Chairs	Alex Medina and Angela Kahn		
Members Present	Adik Parsekhian, Allen Pourvanes, Alondra Hernandez, Anabel Aispuro, Danielle Price, Eva Carrera, Colin Xie, Genevieve Morgan, Janie Strasner, Karina Krynsky, Tracy Holcomb Brackin, Gurudarshan Khalsa, James Pelk, Melissa Hannon, Michelle Rittel, Sara Pineda, Soltana Nosrati, Sora Choi, Tiger Doan, Victoria Shabanzadeh, Elsa Loera, Lorraine Ragosta, Ericka Rivera		
Absent Members	Alex Medina, Amelia Peck, Amy Nearhoof, Angela Kahn, Audra Casabella, Belinda Ankrah, Charity Wabuke, Cheryl Davis, Deanna Park, Jazmin Hernandez, Judy Cardona, Kameelah Wilkerson, Kim Farnham, Lucy Marrero, Luis Pereira, Lynetta Gore, Marianne Callahan, Mark Rodriguez, Martha Basmadjian, Pachara Sujirapanya, Sandra Chang Ptasinski, Stephanie Yamada, Tim Petersen,		
Agenda Item & Presenter	**Discussion and Findings**	**Decisions, Recommendations, Actions, & Scheduled Tasks**	**Person Responsible & Due Date**
Call to Order Introductions and Announcements: Michelle Rittel	Meeting called to order at 1:30pm. Thank you to Pacific Lodge for hosting our meeting this month. Introductions were made. Everyone was requested to review the sign in sheet to update information or remove names of people that don't attend the meeting.		
Review of Minutes: Michelle Rittel	Minutes from 2/18/16 are to be emailed for review and approval.		

Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Quality Improvement (QI)			
MHSIP Survey Training: Kimber Salvaggio	The first half of today's meeting was used to present the MHSIP Survey Training for the May 2016 survey period. Kimber Salvaggio presented the training.		
Departmental QIC Meeting Report: Michelle Rittel	Clinical QI/OMD Report: Revised and new Clinical Policies and Parameters from 2015 summary/highlights handout was reviewed. Not all of the parameters are included however, so you are encouraged to review the parameters on the DMH website. Policy Updates – Office of Compliance: Policy/Procedure Update Handout was reviewed. PRO: Change of Provider – Thank you to everyone for your patience with all of the difficulties with this process. Hopefully, the new dedicated mailbox will resolve a lot of the problems. The contact list will be sent out to everyone for updates. Please make sure you are sending your logs by the 10th of the month, preferably by email and not by fax. Please send by secure email if you are sending PHI. Cultural Competency: Summary provided by Sandra Chang Ptasinski, who can't be here today. The Cultural Competence Plan Requirements state that annual cultural competence training shall be provided and completed by 100% of the		

Departmental QIC Meeting Report, contd.: Michelle Rittel	workforce, inclusive of contract providers. Cultural competence trainings need to address cultural diversity, cultural formulation, multicultural knowledge, cultural sensitivity and awareness, mental health disparities and client culture. The LSCDMH Cultural Competence Training Plan (see handout) was developed by the Cultural Competence Unit in collaboration with the WET Division. The training plan highlights the foundational and specialized cultural competence trainings available in FY15-16, the language interpreters training series and current efforts to monitor the staff's post training skills. Advanced Spirituality Trainings (SA QI Project): Parameters for Spiritual Support and Pre & Post Survey Evaluation Handout was reviewed and discussed. Consumer Participation at SA QICs: Office of Consumer and Family Affairs did peer surveys. The report is due soon. There is a $25 stipend for clients/parents to participate in meetings. The money is for travel expenses. The Goal is to get participation in all SA QICs. Copies of the application/paperwork was handed out. Provider Directory: The Provider Directory is being updated for language ca;acity. Providers need to give the QIC chair the languages spoken in their programs and any other updates. QI Surveys: The survey was due 4/18. If you have not completed and returned it, please do so. CAPP Attendance: The next CAPP is this Tuesday. Please remind FSP and WRAP programs to have Parent Partners attend the meeting. Supervisors and PPs should block off the time on their calendars to avoid time conflicts.	Michelle Rittel will continue to follow up with providers to identify consumer/family participants.	

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Quality Assurance (QA)			
Departmental QA Meeting Report: Michelle Rittel	Audits: There are no audits scheduled for SA2 at this time. Medi-Cal Certification Section: There were 5 overdue Re-certs (out of compliance). Things that don't match across systems – fire clearance, name, address, etc – need to be fixed before re-certs. There will now be earlier notifications of upcoming re-certs to give more time for corrections. State DHCS updates: Waiver reminder – There are contract providers that are not in compliance, not coming to their SA QICs and don't know the requirements. Michelle will get that information for you if needed. Training and Operations: There is a handout with a schedule of upcoming trainings. MAT Assessments: There continue to be problems with MAT assessments not being used by treating providers. The MAT assessment is much more thorough than a regular assessment. If a client is referred to you before the MAT is finished, you will do your own assessment or use a previous copy to open the chart. But the MAT assessment is the priority. You do not need to do an additional assessment if you have a MAT assessment. Policy and Technical Development: Clinical Forms Bulletin – Revised SRL, COS and Community Functioning – Bulletin was handed out and reviewed.		

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Quality Assurance (QA)			
Departmental QA Meeting Report: Michelle Rittel	State Chart Review preliminary findings – Bulletin is coming out. We know there was 17.2% Disallowance and 11.2% Findings. Medical Necessity was at 100%. Make sure all sections of the assessment are completed, even if there is very little information. Medication Consents – We are out of compliance. All but one of them was disallowed, however we had already corrected the form. The audit period was before the form was updated. Treatment Plans- 90% compliance overall. 50 claims were disallowed from Directly Operated for no client signature. Progress Notes were 94% in compliance. You need to provide a service and document a service. EHRs had problem with no date on signatures. You also need to make sure that notes are individualized. Client in Hospital – 2 claims were lost because there was billing for "other things" and not only placement. Home can be considered placement. Day Treatment – 99.8% allowed! It was 100% disallowed 3 years ago. There were 2 days the client wasn't there the whole day and no document of unavoidable absence.. Full report will come out in a couple of months. Then there will be challenges and plans of correction after that. Providers will be notified of disallowances around the time of the draft report. Access to Care Policy is coming! Org Manual – The Org Manual was updated. Residential and PFF services chapter is now finished. Also, all definitions have been removed. If necessary, they were moved to the appropriate chapter. All Appendices are gone except Including Dx for OP and IP. May incorporate procedure codes as an appendix. Certification Section will also be incorporated.		

Departmental QA Meeting Report, contd.: Michelle Rittel	ICC/IHBS Expansion – Katie A. expanding to all EPSDT clients. Will have guidelines for which clients would be appropriate. It's on it's on its way, but not today. IBHIS – LE go live is ongoing. Be careful with client searches before creating a new record. There are still too many duplicate records.		
Suggested Items for Next Meeting:	There were no suggestions made.		
Handouts:	Documentation Training Schedule QI Process Survey Parameters for Spiritual Support (4.15) Pre & Post Survey Evaluation Summary Cultural Competence Training Plan FY 15-16 Cultural Competency Committee Meeting Schedule Brief Review of Revised and New 2015 Clinical Policies and Parameters Clinical Forms Bulletin 16-01 LAC DMH Countywide Activity Fund (CAF) Guidelines for Advisory Board Meetings/Activities Policy/Procedure Update		

Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
NEXT MEETING:	Thursday, June 16, 2016 1:30-3:30pm The Village Family Services 6736 Laurel Canyon Blvd. North Hollywood, 91606		

Respectfully submitted,

Michelle Rittel, LCSW