

County of Los Angeles – Department of Mental Health SA2 Children's QJC

June 16, 2016

Agenda

- 1:30 – 1:35 Introductions & Announcements
1:35 – 1:40 Review of Minutes from April 21, 2016
1:40 – 3:20 Report from Departmental QI/QA.....Michelle Rittel

QI

- Clinical QI/OMD Report
- Policy Updates
- PRO
- CCC Updates
- Consumer Participation
- EQRO
- MHSIP
- Test Calls
- QI Surveys
- Work Plan Goals CY16 and Evaluation Report CY15
- CAPP

QA

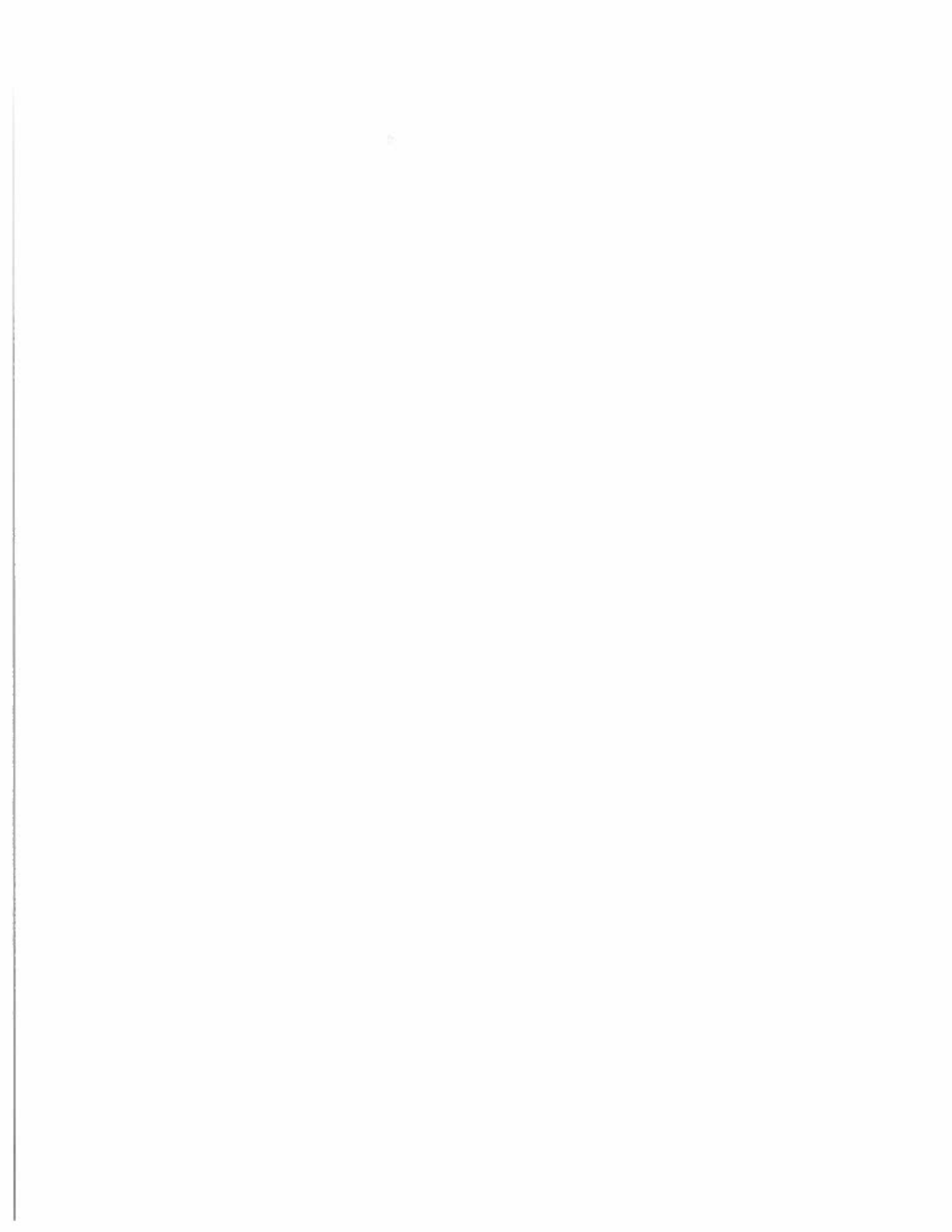
- Audits
- Medi-Cal Certification Section
- State DHCS Updates
- Training & Operations
- MAT Assessments
- Policy and Technical Development
 - QA Bulletin 16-04
 - Clinical Forms Bulletin 16-01
 - IBHIS
- Excluded DX
- Access To Care Policy
- State Audit
- FSP Referrals/SRTS

3:20 – 3:30 Suggestions For Next Meeting/ Host for Next Meeting

Contact: Michelle Rittel: Office – (213) 739-5526
Cell – (213) 276-5521
E-mail: mrittel@dnh.lacounty.gov



Next Meeting:
Thursday, August 18, 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	June 16, 2016
Place	The Village Family Services	Start Time	1:30pm
Chairperson	Michelle Rittel	End Time:	3:30pm
Co-Chairs	Alex Medina and Angela Kahn		
Members Present	Adik Parsekhian, Alex Medina, Amelia Peck, Amy Nearhoof, Angela Kahn, Belinda Ankrach, Charity Wabuke, Cheryl Davis, Stephanie Yamada, Eva Carraera, Gurudarshan Khalsa, Judy Cardona, Karina Krynsky, Lucy Marrero, Lynetta Shonibare, Marianne Callahan, Mark Rodriguez, Martha Basmadjian, Michelle Rittel, Sara Pineda, Tim Petersen, Victoria Shabanzadeh, Kaylee Devine, Karla Mayorga, Janet Bernabe, Jeanine Caro-Delvaillle, Augueda Cabrero, Melissa Hannon, Renee Lee,		
Absent Members	Allen Pouravanes, Alondra Hernandez, Anabel Aispuro, Audra Casabella, Danielle Price, Colin Xie, Genevieve Morgan, James Pelk, Janette Baucham, Jazmin Hernandez, Kameelah Wilkerson, Kim Farnham, Luis Pereira, Pachara Sujirapanya, Sandra Chang-Pisinski, Tiger Doan		
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 The Village 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 April 21, 2016 meeting were reviewed and approved.		

Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Quality Improvement (QI)			
<p>Departmental QIC Meeting Report: Michelle Rittel</p>	<p>Clinical QI/OMD Report: We are still waiting for the Suicide Risk Assessment and Mitigation policy for Directly Operated to be signed.</p> <p>Office of Compliance: Policy Updates Handout of policy updates reviewed.</p> <p>Patients' Rights Office (PRO): Michelle Rittel emailed the contact list for Change of Provider so that it can be updated. If you know there are changes in between requests for updates, please send them in. Please make sure you are sending Request for Change of Provider logs by the 10th of the month by email. Make sure you are using secure email if you are sending PHI. PRO will be implementing auto-confirmation the week of 6/20/16 for Request for Change of Provider emails. June is the end of the fiscal year for the state. All logs must be turned in for the annual report to the state. The logs are due by 7/10/16. Please put the Service Area and your provider # in the subject line of your emails.</p> <p>Cultural Competency Committee (CCC) : The Cultural Competence Training Plan Requirements (see handout) state that the annual cultural diversity, cultural formulation, multicultural knowledge, cultural sensitivity and awareness, mental health disparities and client culture. The LACDMH 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 FY 15-16, the language interpreters training series and current efforts to monitor the staff's post training skills.</p>		

Departmental QIC Meeting Report, contd.:
Michelle Rittel

CCC,cont'd: 3 hour foundational Cultural Competence webinar training will be done annually by DMH for DO staff. Curriculum is being developed. Contract providers are required to be in compliance with the Cultural Competence Plan requirements. There will be tracking and DO and LE need to do a report to state.

Consumer Participation at SA QICs: No providers have contacted Michelle Rittel regarding client/parent participation in our QIC. There is a \$25 stipend for clients/parents to participate in meetings. The money is for travel expense, etc. The goal is to have participation in all QICs. The application/paperwork were handed out at the last meeting. Michelle Rittel can email if requested.

External Quality Review Organization (EQRO): For 2017, EQRO start date is 4/10/17. DMH QI is asking to have the annual review moved to September, so we will be having reviews in both April and September for 2017. SA2 has not had an EQRO review for several years, so it is likely we will be selected for the next review. DMH has a draft report for the 2016 review which is being reviewed by DMH QI. The report will be distributed once it is finalized.

MHSIP Surveys: Thank you to everyone who participated for getting everything in on time. The total for the county was 9,442. SA2 had 1,930 completed and a total of 2,534 turned in.

Test Calls: Reviewed Test Call Quarterly Update Report Form.

Michelle Rittel will email forms when requests are made.

Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Quality Improvement (QI)			
<p>Departmental QIC Meeting Report, contd.: Michelle Rittel and Lynetta Gore (QI Surveys and Work Plan)</p>	<p>QI Surveys: QI Survey Report and blank form were handed out and reviewed. Lynetta Gore reviewed the report and led discussion. This will be an ongoing process, so that new attendees can give feedback and DMH QI can check in with the providers.</p> <p>Work Plan Goals CY16 and Evaluation CY15: QI Work Plan Evaluation Summary – CY 2015 and QI Work Plan Goals Summary – CY 2016 were reviewed by Lynetta Gore. Both are still in process, so were not available for handouts.</p> <p>CAPP Attendance: The next CAPP meeting is this Tuesday. Please remind your FSP and WRAP programs to have their Parent Partners attend the meeting. Supervisors and PPs are encouraged to block out the meeting time on their calendars.</p>	<p>When finalized summaries are done, Michelle Rittel will send the links.</p>	

Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Quality Assurance (QA)			
<p>Departmental QA Meeting Report: Michelle Rittel</p>	<p>Audits: There are no audits scheduled for SA2 at this time.</p> <p>Medi-Cal Certification Section: Continuing Care reform is a comprehensive reform effort to make sure that youth in foster care have their day-to-day physical, mental and emotional needs met; that they have the greatest chance to grow up in permanent and supportive homes; and that they have the opportunity to grow into self-sufficient, successful adults. Group homes will be certified as Short Term Residential Treatment Centers and Foster Family Agencies (FFAs). The deadline for implementation is July 2017. There will be ongoing workgroups to make determinations regarding documentation standards, certifications, etc. No final determinations have been made.</p> <p>State DHCS updates: BBS Registration and Timeline were reviewed. Handout is still in draft form, so it was not distributed. Draft was reviewed. Waiver handout was reviewed. MAA Implementation Plan Update – There is a new state plan but there is no info yet. The effective date could be 7/1/17. LA County is trying to get it moved to October.</p> <p>Training and Operations: The training schedule was handed out and reviewed. DO has added Supervisor Understanding Documentation trainings. Quarterly Monitoring Reports for DO are due 7/15/16.</p>		

Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Quality Assurance (QA)			
<p>Departmental QA Meeting Report: Michelle Rittel</p>	<p>MAT Assessments: Please make sure that MAT Assessments are being used. These assessments are more thorough than regular assessments and provide a lot of important and useful information. If you have a client referred to you, but the MAT Assessment is not completed, providers need to do their own assessment or use a previous assessment to open the case. But the MAT assessment will have priority when it is completed.</p> <p>Policy and Technical Development: QA Bulletin 16-04 Org Manual Updates – Handout was reviewed. Final Clinical Forms Bulletin 16-01 SRL and Community Functioning Evaluation – Handout was reviewed. IBHIS – Practitioner Maintenance (discipline) and Meaningful Use (DO) – just a reminder that “discipline” is used to identify the procedure codes which staff can use or what “discipline” is the staff operating in. DO is rolling out MyHealthPointe for clients – clients will have more access to their information and are more involved in their treatment. DMH QA is working on how to create a culture change around access to client information/engagement.</p> <p>Excluded DX: There are a few “excluded” dx that DMH is pursuing as “included” with the State: Schizophrenia Other, Reactive Attachment D/O and Bipolar Hypomanic. The State says they put in an edit to deny claims without included Dx, but it’s not actually there yet. There is an exception for Deferred Dx and No Dx. Providers need to monitor the dx –for example, Schizophrenia is a covered “area” but Schizophrenia Other is not included.</p>		

**Departmental QA
Meeting Report,
contd.:**
Michelle Rittel

Access to Care: The new policy has more detail about when you need to have medication and initial assessment on the same day. SRL and SRTS are included in the policy, as well as Universal Screening requirements. There is a new walk-in policy coming, which renames is Provision of Services without a Scheduled Appointment. In September or October, DMH will start collecting SRL information from Provider EHRs. Providers have 5 business days to get the disposition into the SRL/SRTS. A client can choose to wait instead of accepting a referral to another provider. Providers still need to schedule an appointment, no matter how long from now. The first offered appointment is what is recorded in SRL/SRTS. So if the client isn't available for 4 weeks, but you have an earlier appointment, you do not need to complete an NOA E.

State Audit: Draft report from the state audit should be here in the next couple of weeks. There is currently no plan to get a report from the Fed-OIG review.

FSP Referrals and SRTS: Please make sure your staff are using only the most updated version of the FSP referral form, which can be found on the DMH website. FSP referrals from providers must be submitted through SRTS. SRTS should be used for any transfer of referral to another provider.

Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
<p>Suggested Items for Next Meeting:</p> <p>Handouts:</p>	<p>No suggestions or volunteers to host the next meeting.</p> <p>Cultural Competence Training Plan FY 15-16</p> <p>Criterion 5 – County Mental Health System – Culturally Competent Training Activities</p> <p>24/7 Test Call Quarterly Update Report Form</p> <p>Program/Agency QI Process Report April 2016</p> <p>Clinical Forms Bulletin 16-01</p> <p>Policy/Procedure Update - June 13, 2016</p>	<p>Michelle Rittel will follow up by email to identify a host for the next meeting.</p>	

Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
NEXT MEETING:	Thursday, August 18, 2016 1:30-3:30pm Phoenix House 11600 Eldridge Ave. Lake View Terrace, 91364		

Respectfully submitted,



Michelle Rittel, LCSW

