

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
SERVICE PLANNING AREA 5**

**QUALITY IMPROVEMENT COMMITTEE
March 01, 2016**

AGENDA

- | | |
|--|------------------|
| I. Welcome and Introductions | All |
| II. Trouble Shooter Roster, Updates | Monika Johnson |
| III. Review of Minutes | All |
| IV. DMH Updates | Jacquie Wilcoxon |
| V. Quality Assurance | Monika/ David |
| • Quality Assurance Liaisons' Meeting Minutes, January 11, 2016 | |
| • QA Documentation Training Schedule, Revised February 08, 2016 | |
| • Clinical Forms Bulletin (DRAFT) No. 16-01, February, 2016 | |
| o MH 718 – Service Request Log (SRL); Incorporation of universal screening elements into the SRL | |
| • QA Bulletin No. 16-02, January 12, 2016, Triennial Onsite Review: System/Chart Review | |
| o Exit Conference: March 04, 2016 | |
| • Office of the Inspector General (OIG) Audit | |
| VI. Quality Improvement | Monika/David |
| • Policy/Procedure Update, February 08, 2016 | |
| • Review of Policy/Procedure 302.07, Scheduling Initial Clinical Appointments and Associated Documentation | |
| • 2013 Psychiatrist Peer Review Medication Monitoring, February 2016, Office Of The Medical Director | |
| • Summary Report of Test Calls Study, Monitoring Accessibility to the 24/7 Toll Free Access Line, January 2016 | |
| • EQRO visit April 15-28, 2016, SA4 and SA6 | |
| • SA Provider Directories – has been translated into all Threshold Languages – will soon be posted on the DMH | |

- website
- Patient's Rights Office – updated PRO Resource Directory
On DMH website
- NOA-E form in Spanish – posted on DMH website
(this form still needs to be translated into other threshold languages)

VII. SA 5 – Updates

Monika/David

VIII. Next QIC Meeting

Monika/David

The next Service Area 5 Quality Improvement Committee meeting will be held on Tuesday, May 03, 2016, from 9:00AM – 12:00PM, at 11303 W. Washington Blvd., Suite 200, Los Angeles, CA 90066.

**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
SA 5 Quality Improvement Committee
Minutes**

Type of Meeting	Quality Improvement Committee	Date:	March 01, 2016
Place	DMH SA5 Administration, 11303 West Washington Blvd., Suite 200, Los Angeles, CA 90066	Start Time:	9:00 AM
Chair	Monika Johnson, DMH	End Time:	11:00 AM
Co-Chair	David Tavlin, Step Up On Second		
Members Present	Kristi Rangel, Alcott Center; Nataly Cohen, Didi Hirsch; Alaina Zink, Didi Hirsch; Evelyn Leonidas, Didi Hirsch; Jacquelyn Wilcoxon, DMH; Monika Johnson, DMH; Ruby Quintana, DMH; Nilsa Gallardo, Edelman - Adult; Bonnie McRae, Edelman – Child; Linnea Shapiro Fuchs, Exceptional Children's Foundation; Eloisa Ramos Robles, Exceptional Children's Foundation; LeeAnn Skorohod, Exodus Recovery; Jenna Ness, OPCC; Allison Fields, New Directions for Veterans; Stephanie Yamada, Pacific Asian Counseling Services; Martha Andreani, St. John's CFDC; Sharon Greene, St. John's CFDC; Angeline Loch, St. Joseph Center; Libby Hartigan, SHARE!; Danielle Price, The Help Group; David Tavlin, Step Up On Second; Cheryl Carrington, Vista Del Mar; Dyan Colven, Vista Del Mar; Anahita Gheyntanchi, WISE & Healthy Aging.		
Excused/Absent Members	Bryan Sawlsville, Didi Hirsch; Michael Lyles, DMH; Belinda Ankrah, DMH; Robin Washington, DMH; LyNetta Gore, DMH; Patrice Grant, Edelman – Child; Kathy Shoemaker, Exodus Recovery; David Kneip, Exodus Recovery; Susan Osborne, OPCC; Deborah Gibson, Homes For Life Foundation; Jimmy Cabrera Jr., Homes For Life Foundation; Deanna Park, Pacific Asian Counseling Services; Yvette Willock, Pacific Clinics; Brenda Pitchford, UCLA Ties for Families; Nancy Tallerino, Vista Del Mar; Anastasia Boeigalupo, WCIL; Jennifer Levine, WISE & Healthy Aging; Jessica Wilkins.		
Agenda Item & Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
Call to Order & Introductions	The meeting was called to order at 9:00 AM	Introductions were made	Monika Johnson QIC Membership

Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
<p>Review of Minutes and Handouts</p> <p>DMH Updates</p>	<p>Minutes were reviewed and approved for January, 2016.</p> <p>The Trouble Shooter Roster was updated.</p> <ul style="list-style-type: none"> • Jacquie made the following announcements: <ul style="list-style-type: none"> ○ The Department priorities this year are homelessness, diversion, and TAY. The Board of Supervisors and the LA City Council have both approved plans for eliminating homelessness. The emphasis is on integrated health. ○ Homelessness – met with police departments; since then great coordination among outreach teams ○ Wraparound programs – DMH will be the lead for Wraparound programs, starting in the new fiscal year. 	<p>Final approved Minutes for November, 2015 were distributed.</p>	<p>QIC Membership Monika</p> <p>Jacquie Wilcoxon</p>

Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
<p>Quality Assurance</p>	<ul style="list-style-type: none"> • Quality Assurance Liaisons' Meeting Minutes, January 11, 2016 • Quality Assurance Documentation Training Schedule, Revised 02/08/16 • Clinical Forms Bulletin (DRAFT) No. 1 16-01, February, 2016 <ul style="list-style-type: none"> ○ MH 718 – Service Request Log (SRL); Incorporation of universal screening elements into the SRL ○ Policy/Procedure, Policy No. 302.07, Scheduling Initial Clinical Appointments and Associated Documentation, Effective 08/01/14. <p>David and Monika reviewed with providers the Clinical Forms Bulletin and pointed out the key revision points such as the incorporation of universal Screening elements, and referenced DMH Policy 302.07. They asked contract providers to integrate the new required data elements into their SRL. This generated a discussion amongst providers regarding the use of the SRTS versus the SRL. Monika and David indicated that the SRTS will eventually be incorporated into IBHIS in the future but currently both systems are required.</p>	<p>Copies of the QA Liaisons' Meetings Minutes for 01/11/16 were distributed.</p> <p>Copies of the QA Documentation Training Schedule from February 2016 were distributed.</p> <p>Copies of the Clinical Forms Bulletin (DRAFT) No. 16-01, February 2016 and copies of the DMH Policy 302.07 were distributed.</p>	<p>Providers</p> <p>Providers</p> <p>Providers</p>

Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
<p>Quality Assurance</p>	<ul style="list-style-type: none"> • Quality Assurance Bulletin No. 16-02, January 12, 2016, Triennial Onsite Review: System/Chart Review <ul style="list-style-type: none"> Jacquie reported that according to the QA Division, the System review went very well. Relatively few providers reported that they were selected for the chart review and of those some indicated that there seemed to have been a focus on reviewing clients in day rehabilitation programs. • Office of the Inspector General (OIG) Audit <ul style="list-style-type: none"> David and Monika reported that a letter will be sent soon regarding a countywide audit by CMS. According to the QA Division, the audit will involve the following: <ul style="list-style-type: none"> ○ 500 claims across the state ○ 50 claims across LA County ○ Audit will be happening soon; the QA Division is expecting a letter any day ○ Not clear yet if inpatient or outpatient or both 	<p>Copies of the QA Bulletin No. 16-02 were distributed.</p>	<p>Providers</p>


Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
<p>Quality Improvement</p>	<ul style="list-style-type: none"> • Policy/Procedure Update, February 08, 2016 David and Monika pointed out that all the listed policies on the log are under review and are not yet finalized. • 2013 Psychiatrist Peer Review Medication Monitoring, February 2016, Office of the Medical Director David and Monika reviewed with providers the purpose, the criteria, findings, and recommendations. • Summary Report of Tests Calls Study, Monitoring Accessibility to the 24/7 Toll Free Access Line, January 2016 David and Monika pointed to the major test results and indicated that SA 5 is scheduled for test calls during June of 2016. The SA5 QI liaison, LyNetta Gore, plans to discuss changes to methodology and the data collection process during the May SA5 QIC. • EQRO FY 2015/16 David and Monika informed providers that the EQRO visit for FY 2015/16 will be in April 2016 and that the service areas selected for the EQRO visit are SA4 and SA6. • SA Provider Directories The SA Provider Directories have been translated into all threshold languages and will soon be posted online. 	<p>Copies of the Policy/Procedure Update, 02/08/2016 were distributed.</p> <p>Copies of 2013 Psychiatrist Peer Review Medication Monitoring letter were distributed.</p> <p>Copies of the Summary Report of Test Calls Study were distributed.</p> <p>The QI Division will inform the service areas of all requirements once they become fully available</p>	<p>Providers</p> <p>Providers</p> <p>Providers QI Division, LyNetta Gore</p> <p>QI Division</p> <p>QI Division</p>

Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations/ Scheduled Task	Person Responsible/ Due Date
<p>Quality Improvement</p>	<ul style="list-style-type: none"> • Patient's Rights Office – updated PRO Resource Directory on DMH website • NOA-E form in Spanish – posted on DMH website • MHSIP data, Spring 2015 Lynetta Gore summarized the following findings: <ul style="list-style-type: none"> ○ A total 11,508 surveys were returned and 9,384 surveys were completed across all 8 Service Areas. This is an improvement from Spring 2014 where 8,483 total surveys were completed. ○ SA5 completed and returned approx. 524 surveys; 40 % of these surveys were YSS-F. 75 % improvement in the amount of completed surveys submitted by SA5 when compared to Spring of 2014! ○ Provider tables reflect providers who completed and returned greater than 15 surveys for YSS, YSS-F, and Adults and greater than 10 Older Adult provider tables. ○ The highest percentage of completed surveys were from the Latino ethnic group ○ SA5 had the highest percentage of Adult consumers (85.1%) reporting that the location of services were “convenient” when compared to all SAs ○ SA5 had the highest percentage of Older Adult consumers endorse that “staff were sensitive to [their] cultural background (87.6%) when compared to all SAs. 	<p>Providers agreed to access the website re. the PRO Resource Directory and the NOA – E forms.</p> <p>Copies of the MHSIP data report, Spring 2015 were distributed, specifically Table 1-4.</p>	<p>Providers</p> <p>Providers</p>

Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations/ Actions/Scheduled Task	Person Responsible/ Due Date
<p>Quality Improvement</p>	<ul style="list-style-type: none"> ○ SA5 had the highest percentage of children reporting that they "had someone to talk to when he/she was troubled (84.3%)" and that "staff were sensitive to my cultural/ethnic background (88.8%)" when compared to all SAs ○ Among all SAs, SA5 was identified as having the subscale(s) highest percentage no fewer than once in each age group. 		

Agenda Item and Presenter	Findings and Discussion	Decisions/ and Recommendations/ Actions/Scheduled Task	Person Responsible/ Due Date
Next Meeting	The next Service Area 5 Quality Improvement Committee meeting will be held on Tuesday, May 03, 2016 at DMH West LA SA5 Administrative Offices, 11303 W. Washington Blvd., Suite 200 in Los Angeles from 9:00AM – 12:00PM.	N/A	N/A

Respectfully Submitted,


 Monika Johnson, Psy.D.


 David Tavlin, MFT