Los Angeles County Department of Mental Health
Transitional Age Youth System of Care (TAY-SOC)
Quality Improvement Committee Meeting

Meeting Minutes: March 27, 2014
Location: West Central Mental Health
3751 Stocker St, Los Angeles 90008

Chair: Aprill Baker, Chairperson
Minutes: Aprill Baker

Start Time: 9am
End Time: 11am

Attendees:
Anthony, Jacqueline – Alafia Mental Health
Armstrong, Valerie – Shields For Families
Atkins-Staci- DMH/West Central Mental Health
Baker, Aprill – DMH/SA 6 Administration
Campbell, Marilyn – Kedren Mental Health
Chae, Christine- Tessie Cleveland
Chavez, Joseph – St. Francis
Clingman, Jacqueline – DMH/West Central Mental Health
Crosby, Mary – DMH/QI Division
Davis, Margaret – Personal Involvement Center
Dinsay, Leah – DMH/Compton Mental Health
Dobbs, Lori – DMH/QA Division
Espina, Lani - Crittenton
Fisher, Cathy - 1736 Family Crisis Center
Garnica, Andrea-Weber Community Center
Gertmenian, Socorro – LA Child Guidance
Gonzales, Jannelle-Hollygrove EMQ
Gonzales, Michelle - WLCAC
Gutierrez, Elva-The Guidance Center
Hayes, Michelle – Eggleston Youth Center
Kim, Kathleen -Counseling4Kids
Lara, Erica - Starview
Lewis, Yolanda-Pacific Clinics
Moore, Vynette-Shields for Families
Nguyen, Mimi – SSG/API
Nguyen, Thang-DMH/Program Review
Ridgway, Angelia- DMH/AFH
Soria, Alejandro – Children's Institute
Ullah, Sabrina – Tessie Cleveland
Vigil, Andy-Drew Child Development Center
Wilkerson, Kameelah-Hathaway-Sycamores
Williams, Kimberly – DiDi Hirsch
Woods, Rosary-Kedren Mental Health

Agenda Item/Presenter	Discussion	Decisions/Scheduled Tasks
Welcome & Introductions		
Agenda Item/Presenter	**Discussion**	**Decisions/Scheduled Tasks**
Review of Meeting Minutes	• Standard	• Minutes were approved with corrections
Quality Improvement-Aprill Baker		
Clinical Quality Improvement-OMD Report	• Annual Medication Monitoring • Parameter 3.10 Medication Assistance for Co-Occurring D/O	• Handout reviewed • Handout reviewed.
SA 6 QI Project	• Discussed using Parameter 4.16 –Family Engagement and Inclusion for Adults as a Performance Improvement Project	• QIC members discussed Parameter 4.16 in relation its application with the clients they serve and efforts already being made to engage and include families of Adult clients. QIC members will bring back ideas for other QI projects that may be more useful at next meeting.
Cultural Competency Updates	• Updates were provided on CCC workgroups being formed. Information provided about LGBTQ workgroup. QIC members encouraged to participate in workgroups.	• Several QIC members expressed interest in attending Cultural Competency Committee meetings. QIC chair will forward dates and meeting information to QIC members.
Patients Rights Office	• Members were advised that State forms, such as the NOA forms are not to be changed (ie putting company logo on them). Members also advised that when providing a list from the providers' directory, the client must get a copy of the entire directory for their service areas, list should not be truncated.	• QIC members clarified the requirement of supplying clients with the provider list.
Policy Updates	• Committee reviewed updated policies. There were no questions related to updates	• Handout provided
2013 Data Analysis	• Mary Crosby discussed MHSIP Map and upcoming SA surveys	• Training for providers selected to participate in the survey will be provided during April QIC mtg.

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Quality Assurance-Aprill Baker		
State DHCS Updates	• The differences between the Initial Services Request Log and the SRTS was discussed. • QIC Chair reminded members that Beneficiary Acknowledgement of Receipt is a mandatory form that needs to be provided to clients • Reviewed letter from state about LPCC's. QIC chair reinforced that DO providers do not employ LPCC's however LE providers that do need to be aware of the restriction's relations to types of services, supervision and waiver requirements for employing an LPCC	• QIC members discussed feeling unclear about the requirements for L.E providers. QIC members discussed survey sent out by Lisa Wicker to obtain information about their eHR or SRTS capabilities. QIC members wanted clarification on whether or not having an eHR or using SRTS is a requirement. QIC chair will get clarification and follow-up with QIC members. • See LPCC handout.
IBHIS Update	• QIC discussed Pilot 1 LE Roll-Out which occurred February 20th; QIC chair advised members that each LE is scheduled learning lab sessions to help get them ready for their roll out and provided contact information for Gordon Bunch who should be directed with any questions regarding IBHIS	
QA Technical Assistance • Claming Analysis	• Discussed QA claiming analysis. Dr. Lori Dobbs advised providers that she will be contacting some to get information about how they are claiming for QA activities and MAA	• Members clarified that QA claiming only applies to DO providers.
• Organizational Providers Manual Revisions	• QIC chair advised members that Organizational Providers Manual Ch 1 has been completed, discussed that the Child and Adult assessments are being reviews, waiting on final approval for them to be released.	
Health Information Management •Clinical Data Integrity Reminder	• QIC member were advised to reinforce to sfaff the importance of inputting accurate information in the system. HIM department getting many requests to delete duplicate records because of errors.	

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Documentation Trainings – Dr. Lori Dobbs	• **Review of upcoming documentation Trainings**	• Handout provided
Program Review/Certification – Than Nguyen	• QIC members had no questions or areas to discuss with Than Nguyen	
Open Agenda		
Adjournment		
	Next Meeting is Thursday, March 27, 2014	

Aprill Baker

3-27-14

Date