

**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
SERVICE AREA 6**

Type of Meeting	Service Area 6 Quality Improvement / Quality Assurance Council	Date	01/28/2016	
Place	12021 Wilmington Ave Los Angeles CA 90059	Start Time:	9:00am	
Chairperson	April! Baker	End Time:	11:00am	
Members Present	Ahmad Kausar, Amber Liberty, Andy Vigil, Anna Yee, Adila Armstrong, Brooke Slusser, Denise Fletcher, Elizabeth Echeverria, Hrug Ghazarian, Jeannette Aguilar, Jeannette Barnabe, Jennifer Phan, Jessica Aguilar, Jose Haro, Joseph Chavez, Joseph De Luna, Karalee Bechtol, Kathy Saucedo, Kevin Frank, Kim Farnham, Kumi Tsuda, Lani Espinas, Laura Hernandez, Leah Dinsay, Lily Fowler, Lois T. Brooks, Linah Zayed, Lisa Heemer, Lynetta Gore, Marcela Dioses, Marietta Watson, Martin McDermott, Melinda Mendel, Mimi Nguyen, Nicole Ward, Rashauna Fair, Reyna Diaz, Rosary Woods, Silvia Simental, Socorro Gertmenian, Sybil Chacko, Thang Nguyen, Tina Kuperman, Windy Gaston, Yovette Roldan			
Agenda Item & Presenter	Discussion and Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible	
Call to Order & Introductions	The meeting was called to order.	Introductions were made	A. Baker	
Review of Minutes	The December 2015 QIC meeting minutes were reviewed.	Minutes were approved	A. Baker	


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<p>QUALITY IMPROVEMENT</p> <p>Clinical OMD</p> <p>American Sign Language Providers/ Hearing Impaired</p> <p>QI Project Update</p>	<p>Suicide Risk Assessment Policy is currently being created. DMH has adopted the use of CSSR-S For Directly Operated Providers. LE can chose to use or their own assessment tool.</p> <p>A webinar for DO staff that provides instruction on how to use Safety Intelligence, is planned for January.</p> <p>QIC reminded about policy reviewed last meetings. On-going efforts are being made to identify support services for the hearing impaired in SA 6.</p> <p>Spirituality Parameters trainings have been completed in each SA. Staff who participated in training will be sent a post-test via email. Post-Tests will provide information on how and if staff were able to integrate the training.</p>	<p>Links to webinar and online training will be provided when available.</p> <p>Preliminary feedback that was given reflect most of staff who participated in training were administrative, more staff with direct client contact should be trained.</p>	<p>A. Baker</p> <p>A. Baker</p> <p>A. Baker</p>

Patients Rights Office	<p>QIC members engaged in discussion regarding the accuracy of The Change of Provider report and the process of submitting the monthly logs to the PRO office. It was suggested that sending logs to PRO via email is best way to minimize errors in the report. QIC discussed the challenge with sending log via email if there is confidential information contained in log. Suggestion about getting all providers to use DMH secure email system was made. QIC chair provided summary of how secure email system works.</p>	<p>QIC Chair will follow-up on the process of creating a secure email account with the same system used by DMH, to provide an option for providers to their monthly logs to PRO via email.</p>	<p>A. Baker</p>
MHSIP Provider Data update	<p>QI Lead, Dr. Lynetta Gore, provided information on Spring 2015 MHSIP data collection.</p>	<p>Handout Provided</p>	<p>L.Gore</p>

<p>QUALITY ASSURANCE Policy and Technical Development</p>	<p>Inpatient Lockout reminder — QIC members were reminded that MN services can not be provided to clients while they are in an inpatient facility.</p> <p>ICD 10 Updates — Updated the included dx list in the Org Providers Manual currently available on DMH website.</p> <p><i>IBHIS for LE Providers — On boarding for LE providers has started up again. An additional 5 providers will be on boarded in February, QA Dept has been talking about the use of SNOMED codes to track social determinants. No final decision has been made about this.</i></p> <p><i>IBHIS for DO Providers — Chart Review tool is being built into IBHIS in order for better tracking and monitoring. "Problem list" will be implemented to pull information from the assessment/CFE to track problems (potential barriers to treatment)</i></p> <p>Service Request Log Modifications- SRL is being modified to include elements of the universal screening process such as insurance, previous MH treatment, etc. Providers will have 6 month to incorporate into their eHR.</p> <p>Review of QA Bulletin 16-02 (draft) — State System and Chart Review and Bulletin 16-01 (Final) — Service Verification Notification. Discussion was held by QIC members about the SVN, including the need to educate clients on what the SVN is prior to them receiving a SVN from DMH. Some members expressed concern about SVN including inherent bias for homeless clients, confidentiality issues and what happens if a client makes a dispute about what services were claimed</p>	<p>Providers discussed provided CM only in relation to discharge. Unless client is in 1MD which is a complete lockout situation.</p> <p>QIC expressed that some codes are still missing in IS. QA lead will follow-up with QA department regarding any missing codes,</p> <p>QIC members were reminded that states System and Chart review are coming up 2/8/16. Providers that have charts selected for the review will be contacted directly. SVN is currently in a pilot stage. Concerns and area to improve are being teased out and addressed by QA.</p>	<p>A. Baker</p> <p>A. Baker</p> <p>A. Baker</p>
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Medi-Cal Certification	No updates		T. Nguyen
Open Agenda	Question regarding Calworks Bulletin 15-02 was posed to QIC members,	Members were unfamiliar with this Bulletin, QA liaison requested provider send question to her via email so further research can be conducted.	QIC
Announcements	SA 6 has a New Child FSP Navigator, Nicole Rillo.		
Next Meeting	February 25, 2016		A. Baker

Respectfully Submitted,



April Baker, QIC Chair

Date _____