



**County of Los Angeles – Department of Mental Health
Service Area VII Administration
Adult Systems of Care**

Quality Improvement Committee

April 21, 2009

**Rio Hondo Mental Health Center
Second Floor Conference Room**

2:00 P.M.- 4:00 P.M.

AGENDA

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|---|-----------------------------|
| I. Welcome and Introductions | Lupe Ayala & Marcel Mendoza |
| II. Review & Approval of Minutes | Lupe Ayala & Marcel Mendoza |
| III. Department of Mental Health Update | Lupe Ayala |
| IV. Parent Advocate Update | Arthur Gomez |
| V. Quality Improvement Council Update | Lupe Ayala |
| VI. Performance Improvement Project | All |
| VII. QA/Procedure Codes Group | Marcel Mendoza |
| VIII. Quality Assurance Issues | Marcel Mendoza |
| IX. Audit Updates | Marcel Mendoza |
| X. Announcements & Provider Updates | All |

**Next Meeting: May 19, 2009 at Rio Hondo Mental Health Center
2:00 PM to 4:00 PM**

**SA7 QIC
April 21, 2009
Minutes**

**Location: Rio Hondo Mental Health
17707 Studebaker Road
Cerritos, CA 90703**

Chairpersons: Lupe Ayala and Marcel Mendoza

Present:

Misty Allen	Alma
Karla Lopez	Providence
Leilani Liu	Masada Homes
Hsiang-Ling Hsu	Asian Pacific Counseling
Carol Sagusti	DMH
Alben Zatarian	ENKI
Mansha Moak	PCS
Margaret Meyer	Homes for Life Foundation
Brent Hale	American Indian Counseling Ctr
Julia Child	Telecare Atlas 7
Arthur Gomez	DMH
Marcella Mendez	Intercommunity Child Guidance Ctr
Audrey Fisher Price	Crittenton Services for Children
Xhalic Huitron	CHCADA
Alma Acevedo	CHCADA

I. Welcome and Introductions

II. Review and Approval of Minutes

Minutes from 3/17/09 were reviewed and approved.

III. DMH Update - Lupe Ayala and Marcel Mendoza

- Next Quality Improvement Committee, we will be having Derek Hsieh from Emergency Outreach Bureau/Psychiatric Mobile Response Team present on suicidal risk assessment in adolescents/adults. Lupe expects the presentation to be approx. one hour.
- Per the Martie Drinan, Quality Improvement District Chief, the EQRO was not as successful as hoped. Overall, the reviewers were concerned as to how we welcome clients as they arrive to the clinic, and ending waiting lists. They also want more consumers and family members as employees. They felt there was a disconnect between transformation activities and how the client is actually being treated.
- A summary of the recent County audit was presented at the last countywide Quality Improvement Council. Areas of focus & findings included the need for documentation of medical necessity prior to

starting treatment, the Client Coordination Care Plans (CCCP's) requiring signatures, and encouraging children to sign.

- Document if the parent is not available and a CCCP can be reviewed with a parent over the phone, and documented as such.
- A 2nd staff member in a group can't be there solely for safety reasons and their contribution must be documented.
- Progress notes must have clinical interventions.
- Behavioral observations, e.g. in a classroom, are reimbursable only if needed for assessment purposes. The note for the observation must document the outcome and plan from the observation.
- Marital treatment is not reimbursable unless one person is the client and the treatment will diminish the impairment.
- There's no maximum on completing an assessment.
- Avoid blended notes, e.g. individual treatment with case management.
- For its clinics, DMH is not recommending using 2-sided forms as often the 2nd side doesn't get copied. NAMI and consumer-run groups can be listed on the CCCP as contacts. If the SFPR no longer exists or is inactive, call the Help Desk, 213/351-1335.
- Question: do current Single Fixed Point of Responsibility's who are not LPHA need to turn over their cases, per the new SFPR policy?
Answer: The new policy is still under review and is not fully in effect, so continue as it until further notice.

IV. Parent Advocate Update – Arthur Gomez

- SA7 and 8 parent advocates and parent partners meet bi-monthly. Arthur feels that maybe providers don't understand the role of the parent partner, and he proposes having Carmen Diaz come to the QIC to do a 30-minute presentation explaining their role.
- Providers mentioned issues in hiring parent partners such as the background check. Crittenton tries to get a waiver from their HR department but this can take a few months. Lupe said that she brought this issue in the past to Ana Suarez who suggested that providers look to their clients, particularly the child & TAY parents for parent partner applicants.
- Carmen Diaz is in process of creating a training program for parent partners. There will be training for parent partners and parent advocates and their supervisors on 4/28/09 at DMH.

V. Performance Improvement Project – Lupe Ayala

- Ana Suarez is okay with current idea of increasing attendance in SA groups, but she would like to see a project on how we can better use the continuum of care to maximize benefits to consumers in accordance with the recovery model. Discussed that the big issue with this model is that clients don't want to leave a program where they are happy with services. Discussed idea of creating a survey for managers to complete re: what are barriers to the flow of the continuum of care?

Survey could be worked on during procedure codes meeting and a portion of the QIC. .

VI. Audit Updates

- Penny Lane had a fiscal monitoring review in the beginning of April and had no recoupments. Auditors questioned daily and group service logs. Penny Lane also has an EPSDT audit on 5/18/09. Crittenton has an audit starting 5/11/09, possibly fiscal. Enki's fiscal audit began this week, 4/20/09.

VII. Announcements

- The SA7 Performance Outcome Survey training will be Tuesday, 4/28/09 from 2:30-5:00p at Rio Hondo. Providers can drop off completed surveys at the next QIC on 5/19, or drop them off to Carol Sagusti at 550 S. Vermont, 10th Floor, on 5/27 and 5/28 from 9:00a – 4:00p.

Submitted by Carol Sagusti



Lupe Ayala
Quality Improvement Chair



Marcel Mendoza
Quality Improvement Chair

Next QIC Meeting is on May 19, 2009