



County of Los Angeles – Department of Mental Health
Service Area 7 Administration

Quality Assurance / Quality Improvement Committee

September 20, 2016

2:00 PM-4:00 PM

- I. Welcome/Introductions Caesar Moreno
- II. Review & Approval of Minutes Antonio
- III. Quality Improvement Antonio/Caesar
- Patients' Rights Office
 - SA PRO Liaisons
 - Grievances & Appeals
 - *ACCESS Center Update
 - Test Calls
 - *Cultural Competency Update
 - Cultural Competency Training (September 29th)
 - Policy Updates
 - Additional QI Updated Dr. Tonia Jones, QI Liaison
 - Presenter: SMART EOB program Dr. Maria Martinez (No Show)
- IV. Quality Assurance Antonio/Caesar
- Scheduled Audits for Svc Area 7?
 - State DHCS Updates
 - Final: Reasons for Delayed board Registration.
 - Training and Operations
 - Policy and Technical Development
 - QA Bulletins (16-05, 16-06 & 16-07)
 - Clinical Forms Bulletin (16-02)
 - Upcoming revision of Policy 401.02 – “Clinical records maintenance, organization & content” (Level 1 & 2): **Timeliness**
 - Reminder: SRL in EHRs (Access to Care)
 - Q&A Robin Washington, QA Liaison

Next Quality Improvement/Quality Assurance Meeting
October 18, 2016

**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
SERVICE AREA 7
QUALITY IMPROVEMENT COMMITTEE (QIC) Minutes**

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| Type of Meeting: | SA 7 QIC | Date: | September 20, 2016 | |
| Place: | Gus Velasco Neighborhood Center 9255 S. Pioneer Blvd. Santa Fe Springs, California 90670 | Start Time: | 2:00 PM | |
| Chairpersons: | Antonio Banuelos Caesar Moreno Kari Thompson (Absent) | End Time: | 4:00 PM | |
| Members Present: | John Medina, Elizabeth Powers, Jessica Sanchez, Shianne Torales, Misty Aronoff, Laura Solis, Michelle Barajas – Sanchez, Alma Bretad, Francisca Ramos, Regina Esparza, Cara Jenson, Gwen Lo, Joel Solis, Michael Olsen, Tiffani Tran, Jennifer Phan, Leticia Diaz, Mike Ford, Jennifer Mitzner, Arlene Contreras, Christine Moore, Robin Washington, Tonia Amos Jones, Adele Kelso, Lucia Cota, James McEwen, Lisa Leon, Cassandra Peterson, Catherine Wulfensmith, Shivani Patel Escamilla, Raul Velasquez, Adriana Carrillo, Danielle Kayne Ogilvie, Antonio Banuelos (Chair), Caesar Moreno (Co-Chair) | | | |
| Agenda Item & Presenter | Discussion and Findings | Decisions, Recommendations, Actions, & Scheduled Tasks | | Person Responsible |
| Welcome & Introductions | Meeting was called to order at 2:00 pm | | | Caesar Moreno |
| Review & Approval of Minutes | Minutes from August 2016 meeting were reviewed Corrections to minutes: addition of participant names (Michelle Barajas-Sanchez, Arlene Castro) | Minutes approved by: Robin Washington Shivani Patel Escamilla | | Antonio Banuelos |

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| <p>Quality Improvement Updates</p> | <p>Handouts & Updates from Countywide QIC</p> <p>Change of Provider Logs August 2016 Provider Logs collected during meeting Change of Provider Form and process will be updated and revised policy is pending.</p> <p>Patients Rights Office Per Anna Bruce (Acting Director of Patients Rights Office), each service area will be assigned a Patients Rights liasion. PRO liasion will attend SA QIC meetings and serve as resource for patients right issues. Addiitonal information will be released later.</p> <p>There will be changes to the Annual Beneficiary Grievance/Appeal Report which summarizes data from the PRO office regarding grievances and appeals that were filed and investigated. The new report will capture data not collected on previous reports. Report will track NOA and NOE processes, linguistic services, field services, and offer better definition of a “grievance”.</p> <p>There will also be a new grievance form template and instructions which will clarify what is a grievance and appeal, and timelines for follow-up. Revised form and process is pending approval and translation.</p> <p>ACCESS Center Update ACCESS Center calls report was provided to group and reviewed. Report outlined the frequency and number of calls made to ACCESS. Information important as it defines outcomes for EQRO and QI plan/goals. John Medina (ACCESS) provided additional information regarding ACCESS center and its processes for staffing and responding to calls. Mr. Medina noted that he could be available should agencies want a presentation on ACCESS.</p> | <p>Follow-up to determine if current Change of Provider form is accessible on DMH website. If so, link will be forwarded to group.SPA 7 process for COP collection will continue.</p> <p>Handout of Report provided to group.</p> <p>If agencies interested in having John Medina present on ACCESS services, please notify QI Chair/Co-Chairs.</p> | <p>Antonio Banuelos</p> |
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| <p>Quality Improvement Updates (continued)</p> | <p>Cultural Competency Update Group was reminded of Cultural Competency training on September 27, 2016 at 600 S. Commonwealth office. Group was reminded to send names of representatives to attend the training. This training is intended as a “train the trainer” format to allow participants to share the presentation with his/her own agency staff. The sharing of this presentation will meet the requirement for annual cultural competency trainings to be conducted with all providers and staff.</p> <p>Question was raised whether the training was mandatory and if agency could develop and present own cultural competency information. The answer was training was not mandatory and agencies can develop its own presentation so long as agencies can document and show evidence that all staff have participated in an annual cultural competency training.</p> <p>Policy Updates Handout provided to group regarding recent policy revisions for their review.</p> <p>Additional QI Updates JV 220 forms have been revised and are now available online</p> <p>E-Consultation (Directly Operated only) will be implemented soon. Goal is to integrate physical and mental health services with regard to consultation/information. October 2016 is target for implementation.</p> <p>CSSRS – Directly Operated only using the screener at this time. Refer to revised policy.</p> <p>Safe and Just policy (Directly Operated only) is currently being reviewed by Office of Medical Director. Goal of proposed policy is to examine adverse events (with regard to employee behavior) in a safe and just manner. More information to come as discussions continue.</p> | <p>Antonio will send list of participants to DMH to reserve parking. Email confirmation will go out.</p> <p>Policy Revisions handout provided</p> <p>Antonio will send information concerning JV forms and instructions once again to group.</p> | <p>Antonio Banulos</p> |
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| <p>Quality Improvement Updates (continued)</p> | <p>2016 Test Calls During meeting, Tonia Amos Jones collected completed test call surveys from the group for review. Ms. Jones thanked everyone for participating in the calls and collected feedback regarding the overall process. Some of the feedback focused on positive aspects such as short wait time and resources provided. Other feedback spoke to the quality of the interpreter through the language line which could be improved. Remainder of test calls will be collected and submitted to Ms. Jones by September 30, 2016.</p> | | <p>Tonia Amos Jones – QI Division</p> |
| <p>Quality Assurance Updates</p> | <p>Handouts from Countywide QA</p> <p>Scheduled audits for SPA 7 No reports of audits identified by group. It was noted that Moss Levy audits are on hold due to change in contracted services. Moss Levy will no longer conduct audits. Contract being moved to another CPA office. DMH will announce new contractor when business agreements are finalized.</p> <p>State DHCS Updates Group referred to document in packet which addresses Reasons for Delays to Board Registrations for unlicensed staff who are testing. Group reminded to review the handout and address any concerns with staff testing delays as soon as possible.</p> | | <p>Caesar Moreno</p> |

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| <p>Quality Assurance Updates continued</p> | <p>Training and Operations</p> <p>Handout provided regarding training schedules.</p> <p>Reviewed request from QA Division regarding exploration of alternative sites to conduct documentation trainings. Providers were asked to identify if had space at agencies for 50 + persons to host a training. Question was raised whether SPA 7 could conduct a Supervisors Documentation Training as this would be beneficial for providers.</p> <p>Policy and Technical Development</p> <p>QA Bulletins:</p> <p>There is finalized QA Bulletin related to DHCS chart review outcome and corrective action plan process (QA Bulletin 16-05)</p> <p>Bulletin released regarding COS services and interim policy concerning documentation guidelines (QA Bulletin 16-06)</p> <p>Finalized bulletin regarding outcome measures. (QA Bulletin 16-02)</p> <p>Draft Clinical Forms bulletin distributed regarding Outpatient Medication Review and Authorization for PHI Disclosure). Bulletins will be distributed when finalized.</p> <p>Draft bulletin distributed regarding updates to ICD 10 codes beginning October 1, 2016. There will additional diagnosis codes to the allowable list but it is still confirmed with the State whether codes will be on the included list.</p> | <p>Caesar Moreno will explore if Gus Velasco Neighborhood Center could be utilized as site for training. Antonio Banuelos and Robin Washington will explore provision of Supervisor Training in SPA 7.</p> | |
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| Adjournment | Meeting was adjourned at 4:00 pm | Next meeting: October 18, 2016 2:00PM-4:00PM | |
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Respectfully Submitted,
Antonio Banuelos & Caesar Moreno & Kari Thompson
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