

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
SERVICE AREA 8 ADMINISTRATION**

**QUALITY ASSURANCE/QUALITY IMPROVEMENT
(QA/QI) COMMITTEE**

AGENDA

**March 19, 2014
2:00 – 4:00 p.m.
Stars Behavioral Health Group
1501 Hughes Way, Ste 150
Long Beach, CA 90810**

QUALITY IMPROVEMENT (QI) MEETING 2:00 – 3:00 p.m.	
I	Welcome/Introductions/QI Announcements: Co-chairs: Emily Ramos, LCSW, Misty Aronoff, MFT, and Michele Munde, LCSW SA 8 liaison: Ann Lee, Ph.D. QI Division Lead: Tim Beyer, Ph.D.
II	Minutes
III	Parameters of Family Engagement & Inclusion for Adults <ul style="list-style-type: none"> • 4.16 Parameters for Family Inclusion*
IV	Clinical Quality Improvement – OMD Report
V	Cultural Competency Committee (CCC) Report <ul style="list-style-type: none"> ○ The LGBTQ workgroup will be held on April 23rd. Please contact Ann Lee if you are interested in joining this workgroup. ○ Next meeting - Wed, April 9th, 1:30-3:30 p.m., 550 Vermont, 10th fl conf rm, Conference call will be available for this mtg.
VI	PRO
VII	Policy Updates* – Office Of Compliance
VIII	State Consumer Perception Survey Period - April 28th - May 2, 2014
IX	EQRO Update – Scheduling meeting with SA QIC for EQRO Preparation
X	Provider Directories Update – deadline for submission of any changes is Thursday, March 20 th . Send changes to Ann Lee at alee@dmh.lacounty.gov.
XI	SA 8 Quality Improvement Project
XII	QID Updates <ul style="list-style-type: none"> • MHSIP 2013 Results • FY 12-13 Change of Provider & Grievances/Appeals Report • Medication Practices & COD Status Implementation Reports • Test Calls 2013 Results • QI Work Plan 2014

**Next Meeting Info:
April 16, 2014
2:00-3:00 p.m.**

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**March 19, 2014
2:00 – 4:00 p.m.
Stars Behavioral Health Group
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**QUALITY ASSURANCE (QA) MEETING
3:00 – 4:00 p.m.**

Co-chairs: Emily Ramos, LCSW, Misty Aronoff, MFT, and Michele Munde, LCSW
SA 8 liaison: Ann Lee, Ph.D.
QI Division Lead: Lori Dobbs, Psy.D.

I	Audits/Reviews – Penny Lane - March
II	State DHCS Updates <ul style="list-style-type: none"> o Initial Service Request Log o Beneficiary Acknowledgement of Receipt Form o Licensed Professional Clinical Counselors (LPCC) – DHCS Info Notice No. 14-005*
III	Documentation Trainings - <i>Schedule attached*</i>
IV	IBHIS Update <ul style="list-style-type: none"> o Pilot 1 LE Rollout – February 20th o Second D.O. Go Live – March 3rd o Roll Out 3 DO – April
V	Program Review/Certification – no report
VI	QA Technical Assistance <ul style="list-style-type: none"> o QA Claiming Analysis (QA Guidelines* http://dmhhqsas2/saspgm/finance/Qaguide.pdf) o DRAFT Clinical Records Bulletin Edition 2014-01 o DRAFT QA Bulletin 14-01 o DRAFT Organizational Providers Manual Chapter One
VII	Health Information Management (HIM) – Clinical Data Integrity Reminders
VIII	Upcoming Items: <ul style="list-style-type: none"> o QA Bulletin – Inpatient Lockout Reminders o QA Bulletin – Reminders from State System Review and QA Reviews o QA Bulletin – Plan Development o COS Manual Changes and Trainings

Next Meeting Info:

**April 16, 2014
3:00-4:00 p.m.
Stars Behavioral Health Group
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SERVICE AREA 8 ADMINISTRATION
QUALITY IMPROVEMENT/QUALITY ASSURANCE (QI/QA) MEETING
Minutes, March 19, 2014**

Type of Meeting	Service Area 8 Quality Improvement/Quality Assurance (QI/QA) Committee		Date
Location	Star View, 1501 Hughes Way, Long Beach, CA 90810		March 19, 2014
Co-chairs	Co-Chairs: Misty Aronoff, MFT, Michele Munde, L.C.S.W., Emily Ramos (absent due to IBHIS go-live responsibilities)		
DMH Representatives	SA 8 QI/QA Liaison: Ann Lee, Ph.D.	DMH SA 8 Representative: Karina Wagner	QI Division Lead: Tim Beyer, Ph.D. QA Division Lead: Lori Dobbs, Psy.D.
Members Present by Provider Name			
1736 FCC Jessica Bright	CHILDREN'S BUREAU Cristina Nolf	EL DORADO	LONG BEACH ADULT
AADAP Jeanette Bernabe	CII Marcela Dioses	EXODUS	LONG BEACH API
ALAFIA Jacqueline Anthony	CITY OF GARDENA Kathy A. Mills-Walker	FOR THE CHILD Sandra Gala-Rae	LONG BEACH CAP
ALMA Misty Aronoff (co-chair)	COASTAL APF/MHC Helen Chang	HARBOR-UCLA Ae Lyen Yoon Dora Anderson	MASADA HOMES Linda Nakamura
BAYFRONT Mel Herst	COUNSELING 4 KIDS	HARBOR VIEW CSC Laura Villa	MHA Courtney Stephens
CCAF Theodore Howlett Virginia Howlett	CRITTENTON Marcella Bricenso	HEALTHVIEW Michael Fitzgerald	PACS Deanna Park
CHILDNET Leeann Ekstrom	DID HIRSCH Aminah Ofumbi	HERITAGE CLINIC	SAN PEDRO MHC
Review of Minutes	The January minutes were reviewed and approved.		
Call to Order & Introductions			

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 QUALITY IMPROVEMENT/QUALITY ASSURANCE (QI/QA) MEETING
 Minutes, March 19, 2014**

QUALITY IMPROVEMENT (QI)			
Agenda Item & Presenter	Discussion and Findings	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
Schedule of Meetings 2014	A list of the meetings dates for 2014 was distributed.		
Audits	Moss Levy has notified providers of a Fiscal audit. They are looking at 2009-2010. 8 agencies in SA 4 have been notified. Audits begin in the next few weeks.		
Clinical Quality Improvement – OMD Report	A draft on the parameters for medications has been revised, a draft has been sent in to the experts in the field. There is a new parameter for Family Engagement and Inclusion. These parameters are on the DMH website under Providers/Clinical Practices. There will also be an online clinical incident reporting which will roll out in September 2014. Each agency is responsible for identifying one person that will be responsible for completing these clinical incident reports online. A suggestion was made to have someone come to the QI Meeting to do a presentation on Clinical Incident Reporting.		
Cultural Competency Committee (CCC)	<ul style="list-style-type: none"> ➤ An LGBTQ UREP subcommittee will be starting. If anyone is interested in joining, please let Ann Lee know. ➤ Next CCC meeting is March 12th from 1:30-3:30pm at 550 Vermont, 10th Floor conference room. ➤ Members were reminded that all grievance forms need to be in the lobby so clients can obtain on their own without needing to ask for a copy. ➤ The Local Mental Health Plan posters are available in all of the threshold languages. The poster is required to be posted in the waiting area. Contact Patient's Rights office for a poster. 		
Patients' Rights Office (PRO)			

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Office of Compliance	Policy Updates: A list of policy updates as of February 10, 2014 was included in today's handouts. The policies can be found on the DMH website.		
EQRO Update	Conference calls are being scheduled for the reviews. SA 1 and 3 will be reviewed from April 28 th – May 1 st . SA 8 is not scheduled in the review. A meeting will be held with QIC chairs. Dr. Tim Beyer will keep the committee posted with any EQRO updates.		
Provider Directories Update	The 2012 Provider Directory for each service area is posted on the psbqi.dmh.lacounty.gov website. If there are any changes to your agency, please inform Ann Lee.		
SA 8 Quality Improvement Project	The committee went around the room and shared any QI issues they were studying at their agency. Please refer to the attached discussion notes. Members will continue to discuss QI project ideas at the next meeting.	A summary of the issues and projects agencies shared will be provided at the next meeting.	Ann Lee

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QUALITY IMPROVEMENT (QA)			
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Audits/Reviews	<p>Moss Levy audits - the Department approved that Moss Levy can provide only a 3 day notice to agencies before arriving.</p> <ul style="list-style-type: none"> ➤ SSG's Moss Levy audit was postponed to April. The auditors will be looking at FY 2011-2012. 		
State DHCS Updates	<p>For school programs, the clock starts ticking for the "30 day" wait time, when you receive the referral. If the referral is received on the 10th of the month, that's when the clock starts ticking.</p>		
Documentation Training	<p>The schedule was included in today's handouts. There was documentation training on February 18th at the Endowment Center. Dr. Lee showed everyone how to find different trainings directly from the website.</p>		
IBHIS Update	<ul style="list-style-type: none"> ➤ Pilot 1D.O. Go-Live was on January 27th ➤ Go Live for the first LEs is February 20th ➤ Second D.O.O Go Live is on March 3rd. ➤ SBCHC is going live April 1st. ➤ If there are duplicate clients, CIOB has determined which would be the "surviving" client in IBHIS to eliminate duplicates. ➤ The Outreach/Engagement, Linkage/Referral, Triage and Peer Support in IBHIS sheet was included in today's handouts. ➤ LACDMH Abbreviations for the Clinical Record (October 19, 2012) was included in today's handouts. With IBHIS clinicians will be able to create their own dictionary with abbreviations. However, attendees were encouraged to use DMH's abbreviations. 		

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<p>Program Review Certification</p>	<p>If you are scheduled for your recertification visit but you are no longer providing a service, such as psychological testing or medication support, at that provider number, please inform Program Review right away as it will slow down the recertification process if they need to delete these services first. Please inform your Lead District Chief in writing on letterhead if there is any service that your provider site is no longer providing. This communication should happen not only for certification visits, but at any time requirements for these services are not met (e.g., no licensed psychologist to provide psychological testing).</p>		
<p>QA Technical Assistance</p>	<ul style="list-style-type: none"> ➤ QA Bulletin No. 08-3: Targeted Case Management Bulletin for Short-Doyle/Medi-Cal Providers was RESCINDED as there was some incorrect information in the bulletin regarding lock out of billing when the client is in an IMD. When a client is in IMD, there is a lock out and nothing can be billed in outpatient. Billing for discharge planning is allowable for psychiatric said you could bill for TCM for Psych Hospitals but not IMD. It has to clearly be related to discharge planning and not a rehab service help the client get ready for discharge. ➤ Several additional Child COD DVDs were distributed. Please encourage staff to do the CEUs after viewing the COD DVD so that UCLA can track these trainings. ➤ Group Claiming Bulletin & Powerpoint handouts were included in the handouts and reviewed with the committee. It needs to be very clear when documenting for groups what the mental 		

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	<p>health services intervention was and the role of each staff member. Identify what intervention was provided and make sure that the time claimed is appropriate.</p> <p>➤ Update: Policy 104.09 – Approved by County Counsel and the Unions. This policy will have changes to assessments and coordination treatment plans that will provide clarification. Revised assessments, 3 year assessment, removal of the annual assessment. The short assessment will only be used by EOB and UCC. It will be the providers clinical decision to complete a full assessment or assess again if there is already a full assessment completed by another agency.</p>		
<p>Upcoming Items</p>	<ul style="list-style-type: none"> ➤ QA Bulletin – Organization Providers Manual Updates ➤ QA Bulletin – Inpatient Lockout Reminders ➤ QA Bulletin – Reminders from State System Review and QA Reviews ➤ QA Bulletin – Plan Development ➤ COS Manual Changes and Trainings 		
<p>Announcements</p>	<p>Mr. Ted Howlett read a poem written by his wife Mrs. Virginia Howlett's titled, "Continuity." Thank you for your poem, Virginia!</p>		
<p>Next Meeting</p>	<p>The next meeting will be held on March 19, 2014 from 2-4 p.m. at Star View's corporate office, 1501 Hughes Way, Long Beach 90810.</p>		

Minutes Recorded by:

 Ann Lee, Ph.D./DMH SA 8 Administration

Minutes Approved by:

 Emily Ramos, L.C.S.W., DMH Co-chair