

County of Los Angeles – Department of Mental Health  
Service Area 3

Quality Improvement Committee Meeting

December 16/09

9:30 – 11:30 am

**AGENDA**

- |     |  |                   |
|-----|--|-------------------|
| I   | Welcome and Introductions              | Bertrand Levesque |
| II  | Review of the Minutes - October 21/09  | Bertrand Levesque |
| III | Review of the Minutes - November 18/09 | Bertrand Levesque |

**Quality Improvement**

- |     |                         |                   |
|-----|-------------------------|-------------------|
| I   | QIC Project`            | Bertrand Levesque |
| II  | Cultural Competency     | Bertrand Levesque |
| III | Patients Rights         | Bertrand Levesque |
| IV  | Dissemination of Report | Bertrand Levesque |
| V   | Test Calls              | Bertrand Levesque |

**Quality Assurance**

- |     |                                  |                     |
|-----|----------------------------------|---------------------|
| I   | Audits                           | Melody Taylor-Stark |
| II  | System Review                    | Melody Taylor-Stark |
| III | QA Bulletins                     | Melody Taylor-Stark |
| IV  | Procedure Codes and IS Shut Down | Melody Taylor-Stark |
| V   | Clinical Records – Non-Open      | Melody Taylor-Stark |
| VI  | Training with Jennifer Eberle    | Bertrand Levesque   |

**Other Issues**

- |    |              |                   |
|----|--------------|-------------------|
| I  | Audits       | All               |
| II | Announcement | All               |
| II | Adjournment  | Bertrand Levesque |

**Next Meeting: January 20, 2010 at Enki, 3208 Rosemead Blvd  
2<sup>nd</sup> Floor  
El Monte, Ca. 91731  
(626) 227 7014**

**COUNTY OF LOS ANGELES- DEPARTMENT OF MENTAL HEALTH**  
**Service Area 3**  
**Quality Improvement Committee Meeting**  
**November 18, 2009**

Misty Allen	<b>Alma</b>	Windy Luna Perez	<b>Etti Lee Homes</b>
Gloria Santos	<b>Almanson</b>	Melody Taylor Stark	<b>Five Acres</b>
Makan Emadi	<b>Arcadia MH</b>	Gassia Ekizian	<b>Foothill Family</b>
C. Weatherspoon	<b>Arcadia MH</b>	Toni Aikins	<b>Hillsides</b>
Helena Ditko	<b>Arcadia MH</b>	Sharon Montgomery	<b>Juvenile Court MHS</b>
Leah Merjil	<b>Bienvenidos</b>	Taisha Langley	<b>Leroy Haynes Center</b>
K Rhodes	<b>Bridges Inc.</b>	Ana B. Bortolissi	<b>Leroy Haynes Center</b>
Stella Tam	<b>CFAR</b>	Rhiannon DeCarlo	<b>Maryvle</b>
Julia M. Soler	<b>Children's Bureau</b>	Rhonda Chabran	<b>Pacific Clinics</b>
Paul Eberly	<b>Crittenton Services</b>	Judy Law	<b>PUSD</b>
Eric Yamamoto	<b>David &amp; Margaret</b>	Rosa Martinez	<b>Rosemary Children's</b>
Leah Dinsay	<b>DMH</b>	A Natoliman	<b>Serenity Infant Care</b>
Bertrand Levesque	<b>DMH</b>	Larra R. Mesdoza	<b>Serenity Infant Care</b>
Angel Kelly-Blaydes	<b>DMH</b>	Stephanie Sullivan	<b>Social Model</b>
Gina Scanlon	<b>DMH/Juvenile Justice</b>	Dustin Schiada	<b>Spirit</b>
Porenda Martinez	<b>DMH/SA3</b>	Stephanie Harper	<b>The Family Center</b>
Ike Mendoza	<b>DMH</b>	Elizabeth Owens	<b>Tri-City Mental Health</b>
Seth Meyers	<b>DMH</b>	Sandra Espinoza	<b>Trinity</b>
Conception Lugo	<b>D'Veal</b>		
Michelle Hernandez	<b>Enki</b>		

**WELCOME**

Bertrand Levesque welcomed the group at 9:35 a.m. followed by self-introductions.

**REVIEW OF THE MINUTES**

The minutes will be reviewed at the next meeting.

**WELCOME NEW CO-CHAIR**

Bertrand welcomed Melody Taylor Stark from Five Acres, as one of the Co-Chairs.

**RISK MANAGEMENT**

Mary Ann O'Donnell presented on "Managing Clinical Risk. She reviewed contact information and the "Risk Management" handout.

**QUALITY IMPROVEMENT**

**QIC PROJECT**

Bertrand emailed several links to be printed and kept in a binder. This project should be kept as part of the QI/QA program and to make sure that it is passed on to any successor. All future bulletins should be added to the Bulletin section.

### **SERVICE AREA 8 QIC PROJECT**

Bertrand discussed that Service area 8 has researched **Missed Appointment** for their project. Their results showed that transportation, double-booking, hospitalization, and the client being detained after school were the main causes for missing appointments. They suggested that a reminder call, helping client with scheduling, and make sessions interesting will help with attendance.

### **EXTERNAL QUALITY REVIEW ORGANIZATION (EQRO)**

Bertrand reported that for the EQRO audit, Service Area 3 may be the chosen Service Area. The Auditors may be focusing on missed appointment and the Project from service area 8 may be part of the audit. The Auditors may be visiting clinics to get a feel for the affective atmosphere – warm, welcoming, not chaotic, patient rights poster & pamphlet in the waiting room, etc. Consumer focus groups are usually part of the audit. The auditors are usually interested to hear what consumers have to say.

### **CULTURAL COMPETENCY**

The committee working on the Cultural Competency Plan is progressing in establishing criteria. Once all has been decided, it is expected that Directly Operated Clinics & Contractors will comply with the new plan. More will be said about the criteria in months to come.

### **REVIEW OF ANNUAL BENEFICIARY**

Bertrand presented the report that the Patients Rights Office prepared and submitted of the State, - LAC-DMH ANNUAL BENEFICIARY GRIEVANCE/APPEAL/STATE FAIR HEARING. A Table FY 06-07, 07-08, 08-09 was distributed to show the trends over the years.

### **SURVEYS**

As previously discussed, there is no Consumer Perception Survey in November/09. It is highly likely that these will become an annual task

### **MUTUAL AND UNILATERAL TERMINATION**

Bertrand discussed the Hand out Policy on Mutual and Unilateral Termination. Improper termination may hurt our clients. As clinicians we should avoid this. DHM has policy on proper termination. The policy was reviewed and distributed.

### **QUALITY ASSURANCE**

#### **SYSTEM REVIEW**

As previously discussed there is a System Review Audit scheduled for 2-8-2010  
The Adult Clinical Records will be audited from 3/1to 3/5 2010. The Pre-Audit Checklist was reviewed at the last QIC meeting (this checklist had been e-mailed and handed out by Diane Guillory). The Policy and Procedures checklist was also handed out. Two logs needed/should be kept by all agencies – the Cultural Competency log and the Initial Contacts log. These are specified on the checklist. The Reviewers will make anonymous inquiry calls and then review the log of the agency they called to make sure the contact information was recorded: i.e.: the name, time, “refuse to give contact information,” reason.

**ADVANCED HEALTH CARE DIRECTIVE**

Advance Health Directive Fact Sheet is being updated with a new phone numbers. Please remember that you're required to provide this sheet to all clients 18 and over.

**NEW QA BULLETINS**

Gassia reviewed and gave a brief description of the following Bulletins that were emailed to all members.

- a. Updating Substance Use/ Abuse diagnosis and Dual Diagnosis codes.
- b. Update regarding procedure codes for MAT/DCFS and MAT/DMH plans.
- c. Opening Dates for Episodes
- d. Services & Claims to Medi-Cal During the Assessment Period
- e. Recording and Reporting a Mental Health Diagnosis
- f. Procedure Code Changes

**DAILY SERVICE LOG**

Gassia briefly discuss the draft that is being worked on for the Daily Service Log- this includes all the info that is needed to be on Short-Doyle Medical Part II. However more will be presented when the form is official.

**ELECTRONIC SIGNATURE**

Gassia presented on the Electronic Records- Signature certification for contract providers. This will be a way for contractors to certify to county that their e-signature meets requirements. This is now in final draft. More will be presented when it is official.

**TRIAGE**

Gassia reported that the Department was asked to develop a triage process. The QA department developed a Triage Form that would help in the triage of Clients and to ensure that there is retrievable documentation on anyone who contacts the clinic. A data system will be developed that will help with storing information on clients who were triaged, but an episode was not opened.

**ADJOURNMENT**

Bertrand thanked everyone for attending and adjourned the meeting at 11:35 a.m. The next meeting will include a pot luck brunch.

**Minutes recorded by:** Rhonda Chabran, LCSW  
Quality Improvement Committee

**Minutes approved by:**   
Bertrand Levesque, Ph.D.  
Quality Improvement Committee Co-Chair

**NEXT MEETING**The next meeting will be **January 20, 2010 (9:30 a.m.-11:30 a.m.)** at Enki, 3208 Rosemead Blvd., 2<sup>nd</sup> Floor, El Monte, CA 91731. @ 626-227-7014