Los Angeles County
Department of Health Services

annual report 2014-2015

Health Services
LOS ANGELES COUNTY

Board of Supervisors



Hilda L. Solis
First District



Mark Ridley-Thomas
Second District



Sheila Kuehl
Third District

Sachi A. Hamai, Chief Executive Officer
County of Los Angeles

Los Angeles County Department of Health Services

Mitchell H. Katz, MD, Director of Health Services

Hal F. Yee Jr., MD, PhD, Chief Medical Officer

Gregory C. Polk, Deputy Director, Administrative Operations

Christina R. Ghaly, MD, Deputy Director, Strategy and Operations

Tangerine Brigham, Deputy Director, Managed Care

Mark Ghaly, MD, Deputy Director, Community Health

Alexander K. Li, MD, Deputy Director, Care Transitions

Anish Mahajan, MD, Director, System Planning, Improvement and Data Analytics

Nina Park, MD, Chief Executive/Medical Officer, Ambulatory Care

Allan Wecker, Chief Financial Officer

Kevin Lynch, Chief Information Officer

Elizabeth Jacobi, Human Resources Director

Daniel Castillo, CEO, LAC+USC Medical Center

Kimberly McKenzie, RN, MSN, Interim CEO, Harbor-UCLA Medical Center

Jorge Orozco, CEO, Rancho Los Amigos National Rehabilitation Center

Carolyn Rhee, CEO, Olive View-UCLA Medical Center

Gerardo Pinedo, Director, Government Affairs and Communications

This publication is dedicated to the more than 800,000 Los Angeles County residents whom we serve each year, as well as to the men and women of our department who ensure access to high-quality, patient-centered and cost-effective healthcare through direct services at DHS facilities and through collaboration with our community and university partners.



Don Knabe
Fourth District



Michael D. Antonovich
Fifth District

Message from the Director



I am delighted to present to you the Department of Health Services' 2014-15 Annual Report. It is filled with pages of the achievements of the amazing, creative, dedicated work-force of the Department of Health Services.

As you will see throughout the report, much of our effort in this past year was spent building and implementing our integrated electronic health record, called ORCHID. It is the largest, and most successful IT initiative in the history of our Department.

However, the significance of this project goes way beyond the introduction of a state-of-the-art system to manage the care for our patients. To me the great achievement is that for the first time all of the Department of Health Services facilities and divisions agreed on and implemented a system together. This required tremendous effort and compromise. For every process, big and small, we had to choose a single way to do it, not easy for a department that was running 6 different servers, each with their own customized software. Also, because it is a fully integrated system across our department, we had to develop, for the first time, a smooth process from the moment of registration through the inpatient care at the hospital to the outpatient area, with all the various disciplines — medicine, nursing, pharmacy, radiology, laboratory — doing their part.

Over the course of developing ORCHID, people with similar jobs across our department met often for the first time to figure out the best way to do things. And when we go live at a facility subject matter experts from across our De-partment swarm in to help. All this has led to a comradery, a sense of common purpose, and pride across the de-partment that is way more important than any IT system.

None of these accomplishments could have occurred without the support of the Board of Supervisors, to whom I am very grateful. Also, the support of our County CEO and all the other county departments that we rely on greatly con-tributed to our success. Special thanks go to the Hospital Commission and the ACN Advisory Board, our community and University partners. I am indebted to you all.

Best wishes,



Mitchell H. Katz, MD
Director, Health Services

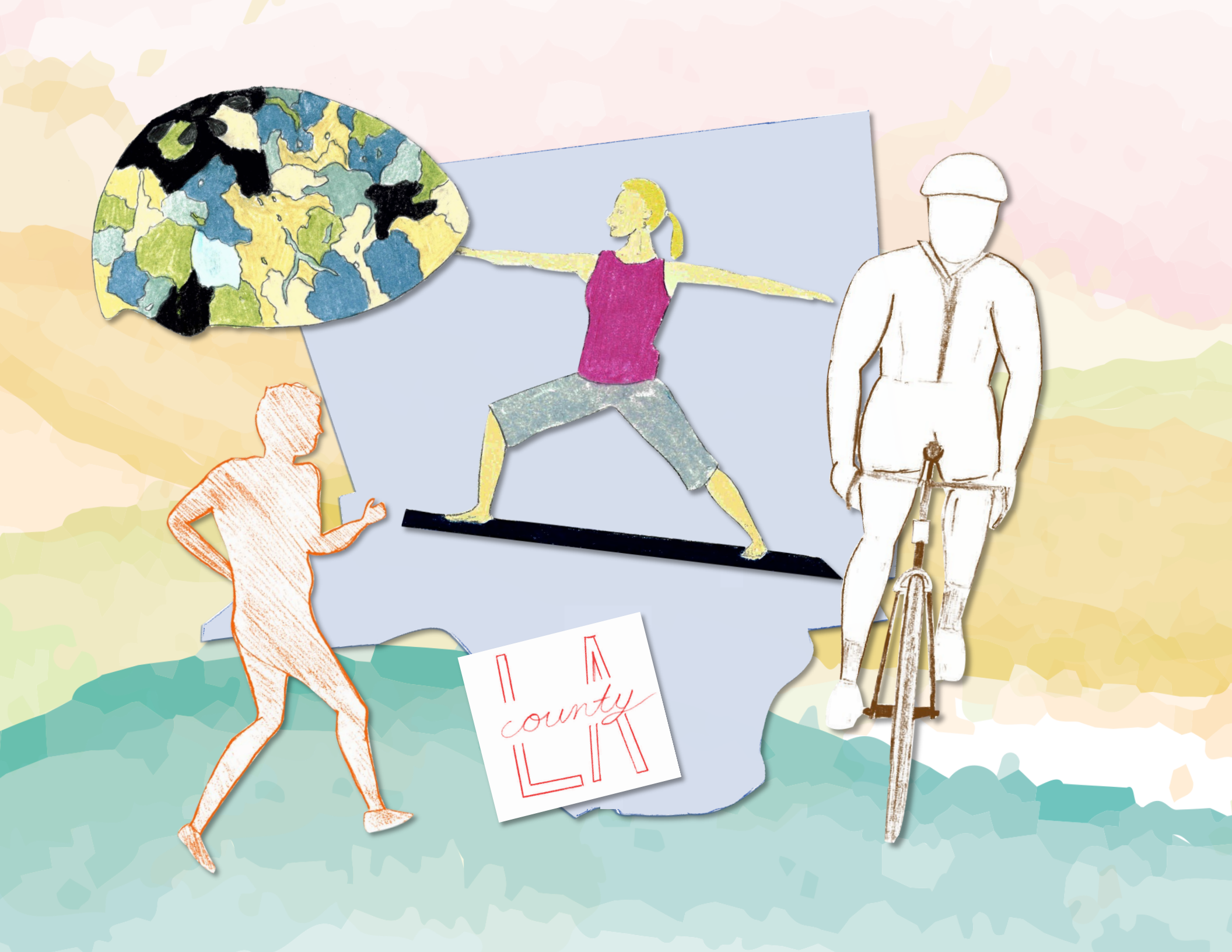

LA
county

table of contents

section I.I ambulatory care network

7 Ambulatory Care Network
9 High Desert Regional Health Center
11 El Monte Comprehensive Health Center
13 H. Claude Hudson Comprehensive Health Center
15 Hubert H. Humphrey Comprehensive Health Center
17 Long Beach Comprehensive Health Center
19 Mid-Valley Comprehensive Health Center
21 Edward R. Roybal Comprehensive Health Center

section I.II outpatient center

25 Martin Luther King, Jr. Outpatient Center

section II hospitals

29 Harbor-UCLA Medical Center
31 LAC+USC Medical Center
35 Olive View-UCLA Medical Center
37 Rancho Los Amigos National Rehabilitation Center

section III program and administrative units

41 Audit & Compliance
43 Capital Projects
45 Centralized Contract Monitoring Division (CCMD)
46 Care Transitions & Systems Integration
47 College of Nursing and Allied Health (CONAH)
49 Contracts & Grants
51 Diversity & Cultural Competency
53 Emergency Medical Services (EMS) Agency
55 Enterprise Health Information Management
57 Facilities Management
59 Government Affairs & Communications
61 Housing for Health
63 Human Resources
65 Information Technology (IT)
67 Integrated Programs
69 Juvenile Court Health Services
71 Managed Care Services
73 Office of Nursing Affairs (ONA)
75 Healthcare Workforce Development Program
77 Pharmacy Affairs
79 Planning & Data Analytics
81 Quality Improvement & Patient Safety (QIPS)
83 Risk Management
85 Specialty Care Improvement Initiative
87 Supply Chain Operations Network
89 Teleretinal Diabetic Retinopathy Screening Program
91 Women's Health Programs & Innovation (WHPI)
93 DHS Fiscal Review



Lake Los Angeles

High Desert Regional Health Center

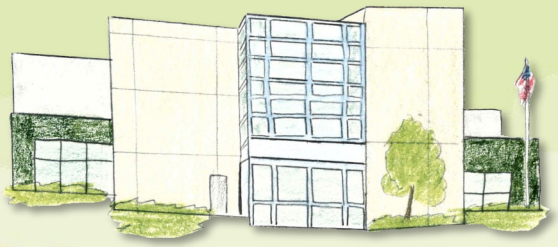




Littlerock



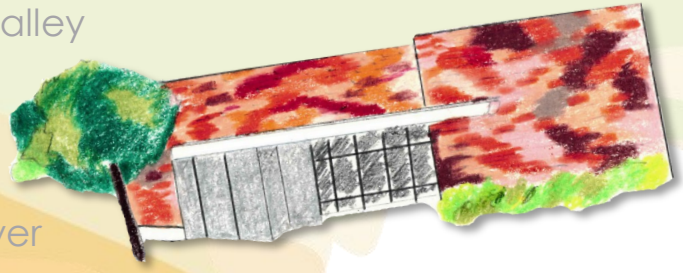
Antelope Valley



South Valley

Wilmington





Bellflower



Humphrey

Vaughn School-Based Clinic

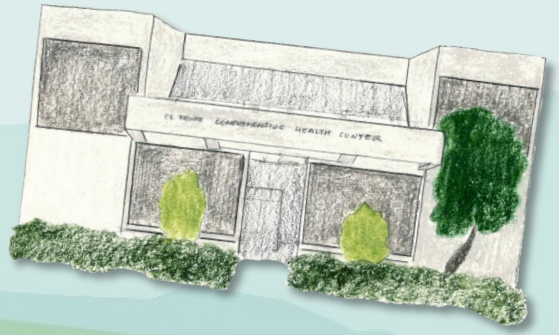


Ambulatory Care Network

San Fernando



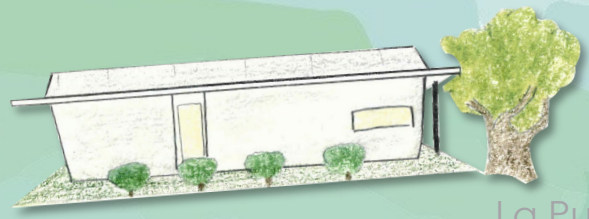
El Monte



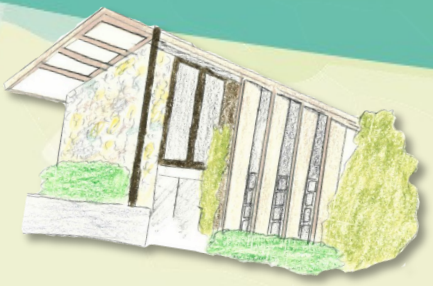
Mid-Valley



La Puente



Glendale



Roybal



Hudson



Long Beach



Ambulatory Care Network

The past year was yet another busy and exciting one at the seventeen Ambulatory Care Network (ACN) clinic facilities. In addition to the highlights of our many accomplishments you will find in the next few pages, we altogether as one network focused on the following:

ORCHID was implemented successfully in these sites: Long Beach, Wilmington, Bellflower, Humphrey, Roybal, Hudson, El Monte, and La Puente. We thank our staff and our patients for being patient throughout this phenomenal change and advancement.

The ACN staff have continued to enhance primary care services and to strengthen the Patient-Centered Medical Home (PCMH) teams. We have focused on improving the accuracy of empanelment to each PCMH and scheduling of patients with their empaneled provider, increasing the availability of same-day appointments, and expanding the modes of patient-PCMH interactions via non-face-to-face patient touches. LEAN Six Sigma training and process improvement projects throughout the ACN provided staff with skills and tools to reduce wait times, and to streamline clinic processes.

Experience — patient and employees — was the key word for us this year. Through a joint labor-management initiative, all ACN front line staff and supervisors were trained on the Customer Service model. The very first annual ACN Nurse Week celebration took place at Humphrey CHC (Comprehensive Health Center) to recognize, honor, and celebrate all of our nurses and support staff.

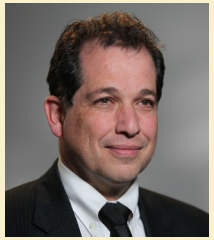
2015/2016 objectives

- Complete ORCHID implementation in the remaining ACN clinic sites: Mid-Valley, San Fernando, Glendale, Vaughn, High Desert, South Valley, Antelope Valley, Littlerock, and Lake Los Angeles
- Expand access to PCMHs by exploring colocation with sister department clinic sites, and by the use of alternative care models and increase in implementation of standardized procedures within existing clinic sites
- Improve patient first impressions and clinic navigation
- Strengthen IT and reporting infrastructure to enhance the availability of accurate data, and further advance the use of data to drive performance improvement
- Implement a robust health education program across the ACN
- Implement a comprehensive employee recognition program

administrative staff



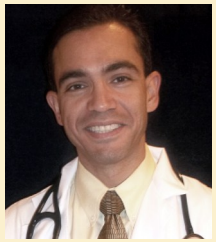
Nina Park, MD
Chief Executive/Medical Officer



Jeffrey Guterman, MD, MS
Chief Research & Innovation Officer



Quentin O'Brien
Chief Operations Officer



Guillermo Diaz, MD
Chief Medical Information Officer



Debra Duran, RN
Chief Nursing Officer



Candy Smith
Chief Financial Officer


EXIT
TEAMWORK






FIJI



High Desert

Antelope Valley—Lake Los Angeles—Littlerock—South Valley

High Desert Health System (HDHS) is comprised of High Desert Regional Health Center (HDRHC), four County community-based health centers and an infirmary/clinic at the Acton Rehabilitation Center. In collaboration with a network of Community Partner clinics, HDRHC provides outpatient health services to residents in the north Los Angeles County service area that encompasses approximately one-third of the area of Los Angeles County.

HDRHC offers a comprehensive range of outpatient services, including primary care for adults and children, women's health, urgent care, medical and surgical subspecialty clinics and an ambulatory surgical center. HDRHC also provides ancillary diagnostic and treatment services, including laboratory, pharmacy, radiology, diagnostic testing, respiratory therapy and physical, occupational and speech therapy.

The following special programs are also located at HDRHC: the Pediatric HUB Clinic, the Antelope Valley Hope Clinic (HIV/AIDS), Disease Management clinics for Asthma and Diabetes, a Pediatric Behavior Disorders Clinic, a Pediatric Dental Clinic and an Oncology Clinic with a chemotherapy infusion service.

The South Valley Health Center (SVHC), located in east Palmdale, provides adult and pediatric primary care, urgent care and approximately eight subspecialty clinics. The Antelope Valley Health Center (AVHC), located in east Lancaster, provides primary care and family planning services. Primary care services are also provided at Lake Los Angeles Community Clinic (LLCC) and Littlerock Community Clinic (LRCC).

Continuing Care Clinic

As part of the restructuring of primary care services in the post health care reform environment, HDRHC established a Continuing Care Clinic (CCC) in March 2015. Short-term follow-up and medical management is provided to patients who are uninsured and not yet empaneled with a DHS PCMH. This new clinic established a critical access point for patients who require continued care, but are not eligible for enrollment in a health plan under the Affordable Care Act (ACA). From March – June of 2015, the CCC provided a total of 412 visits.

General Relief Clinic

In August of 2014, HDRHC initiated a new clinic for the assessment of General Relief (GR) patients. During the first eleven months of operation, the clinic provided 511 visits. This clinic provides timely evaluations of specific medical conditions to determine if patients qualify for continued GR coverage based on those conditions.



Key Statistics

Total PROVIDER Visits – 124,818 (HDRHC, HCs, Acton)
Primary Care – 59,920
Surgery / Special Procedures – 1,121
Urgent Care – 39,581
Prenatal/Post-Partum – 5,659
Specialty Care – 15,393
Dental – 2,315

administrative staff



Beryl Brooks
Administrator



Ruth Oren, MD
Medical Director



Susan Urbanski, RN
Nursing Director

New State-of-the-Art Facility

The new state-of-the-art HDRHC facility opened on June 23, 2014, and all programs and services were moved from the former HDHS facility. The first few months of FY 2014-15 involved completing the transition to the new facility and adjusting operations to take advantage of the new space and technology. Following the move, the necessary approvals were secured which allowed the performing of surgical procedures in the new Ambulatory Surgical Center (ASC on July 28, 2014. Final Center for Medicare and Medical Services (CMS) certification for the ASC was received on August 19, 2014. For the convenience of patients, all clinical services are now located within a single building. With the new location in central Lancaster, patients have better access to services.

Increase in Urgent Care Visits



The new HDRHC facility has resulted in an increase of urgent care visits. Total urgent care provider visits increased by 50.06% from 13,307 visits in FY 2013-14 to 19,966 visits in FY 2014-15. The location of the new facility in central Lancaster has made urgent care services easier for patients to access. This will also support efforts to manage emergency room costs for managed care health plan patients assigned to HDRHC facilities. The demand for urgent care services also remained high at the SVHC which provided 19,614 urgent care visits in FY 2014-15.

Relocation of Prenatal Services

On January 12, 2015, prenatal services were relocated from AVHC to HDRHC and consolidated with the Women's Clinic. Patients receiving prenatal care at HDRHC now have better access to laboratory testing, ultrasound, and other ancillary services. With the addition of prenatal care, the Women's Clinic offers a comprehensive array of women's health services in a single clinic.

Growth of the Pediatric HUB Clinic

In FY 2014-15, services at the Pediatric HUB Clinic were significantly enhanced with the addition of two new providers. This clinic provides initial assessments and ongoing care to children detained in the Foster Care system. The Pediatric HUB Clinic also provides forensic examinations for children who are suspected victims of sexual abuse or neglect. Total provider visits to the HDRHC Pediatric HUB clinic increased over 32% from 2,834 visits in FY 2013-14 to 3,753 visits in FY 2014-15. To improve access for patients, the Pediatric Hub Clinic began offering walk-in services.

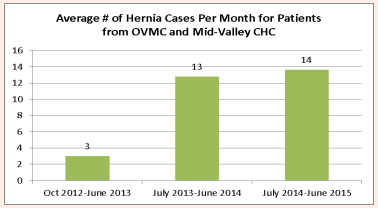


The Pediatric HUB Clinic is operated through close collaboration with the DHS and the Department of Children's and Family Services (DCFS). In FY 2015-16, the scope of services in the clinic will be expanded to include on-site staff from the Department of Mental Health (DMH).

Patient Experience Improvements at the Antelope Valley Health Center

Implementing the first phase of enhancements planned to improve the patient's experience at AVHC, the ACN purchased new waiting room furniture. Additionally, the HDRHC leadership, with support from the DHS Capital Projects Division, worked with an architectural firm to develop plans to further improve the patient's experience by updating the clinic appearance. The installation of new flooring, ceiling tiles and lighting along with updating the painting scheme to include accent walls will provide a more inspiring experience. Services provided by both DHS and the Department of Public Health (DPH) are co-located at AVHC and both departments are collaborating to update the appearance of public areas, signage and transaction windows.

Ambulatory Surgical Center



The HDRHC ASC has made a significant contribution in helping address scheduling backlogs and patient waiting time for patients requiring hernia surgery referred from Olive View – UCLA Medical Center (OV-UCLA MC) and Mid-Valley Comprehensive Health Center (MVCHC). The number of hernia surgeries performed at the HDRHC ASC from those facilities increased from an average of three per month in FY 2012-13 to an average of 14 per month in FY 2014-15. A total of 150 hernia surgeries were performed on patients from those facilities in FY 2014-15.
In October 2015, a general surgeon began performing laparoscopic cholecystectomy (gall bladder removal) surgeries at the HDRHC ASC. The addition of this surgery was made possible by the new equipment and supporting technology in the ASC following the move to the new facility. The availability of this surgery at the HDRHC ASC has a direct impact in reducing surgical backlogs at OVMC-UCLA MC since patients from HDRHC facilities are no longer referred for this procedure.



In November 2014, the HDRHC ASC began providing lithotripsy procedures (minimally-invasive treatment of kidney stones). In FY 2015-16, the HDRHC ASC will start offering selected laser procedures designed for urological conditions.

El Monte/La Puente

Comprehensive Health Center

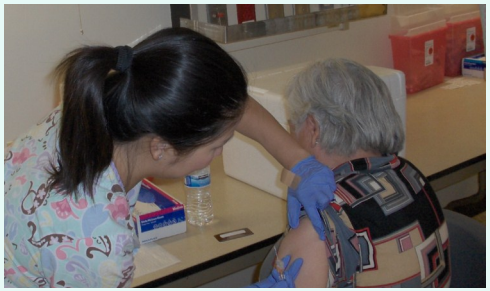
WIC partnership — pertussis outreach



El Monte CHC formed a successful partnership with the Women, Infants, and Children (WIC) Centers in our community to provide pertussis or whooping cough vaccines to family members and caretakers of infants. This partnership was motivated by the pertussis epidemic in California. It was also an opportunity to provide an essential service in the community; promote El Monte CHC and La Puente Health Center; and form valuable community-based partnerships.

Infants are not able to adequately develop immunity to pertussis; therefore it is important for family members and caregivers who interact with infants to be immunized, forming a "cocoon" of immunity.

Five outreach events were conducted at various WIC locations during which a total of 100 immunizations were provided. Information regarding primary care for the entire family was also offered. Plans are in place to resume the outreach activities in Fiscal Year 15/16. Based upon staffs observation that there was an interest for working parents to receive vaccines, outreach events are planned to start later in the afternoon through the early evening.





administrative staff



Ernest Espinoza
Administrator



Stanley Leong, MD
Medical Director



Debra Duran, RN
Nursing Director

facility upgrades

In an effort to enhance the comfort and safety of our patients and staff, El Monte CHC continued with several initiatives to improve the facility environment.

Waiting Room Furniture – As part of an ACN project, seating in the patient waiting areas was upgraded in El Monte CHC's front lobby, Pediatric Clinic waiting room, Pharmacy/Laboratory waiting room, various Adult Clinics and the Dental Clinic. Furniture colors and new wall colors were selected to create a pleasing environment. The seating was selected for both comfort and durability, with bariatric seating available in each area.

Flooring – New flooring was installed in the majority of the public areas at El Monte CHC. Also, many staff areas received flooring upgrades with new tile or carpet. Again, this effort was intended to enhance the comfort and safety for our patients, staff and visitors.

Pediatric Clinic Waiting Room – Last year the Pediatric Clinic was relocated to provide additional, contiguous space for the Adult Clinics. This year, improvements were made to the waiting room to enhance the comfort of our patients and their families. An upgraded television was placed in the waiting room; new seating units with vibrant colors and prints of animals were installed; the walls were painted with coordinated, accent colors; and colorful wooden cutout designs were installed on the walls.

Ergonomic Seating for Staff - Approximately 225 ergonomic task chairs were issued to work stations and staff members. In many cases, seating that was more than 20 years old and not ergonomic appropriate was replaced, The new chairs are adjustable and meet ergonomic standards. Additional side chairs were also placed in office areas for patients and guests.



kudos to El Monte CHC/La Puente Health Center staff!

El Monte CHC staff and representatives from SEIU 721 have been engaged in supporting the activities of the CITs. The CITs emphasize input from front-line staff to make operational improvements. Based upon the desire from staff to provide suggestions, "Kudos" boxes were installed in each staff break room in February 2015.
The input from the boxes is reviewed regularly at the CIT Leadership committee meeting. Administrator Ernest Espinoza responds to each suggestion at the general staff meeting. Many of suggestions have resulted in improvements for our staff and patients. For example, improvements to the patient restroom signage was made in patient care areas and a change in cleaning solution was made to a lighter fragrance.
Twelve employees have received "Kudos" thus far. Each of these employees has also been recognized at the general staff meetings, encouraging participation and raising staff morale. Information on "Kudos" is also posted on the staff bulletin board for everyone to see and enjoy. This form of recognition has turned into a nice compliment to the established Employee of the Month program.



H. Claude Hudson

Comprehensive Health Center

H. Claude Hudson Comprehensive Health Center (HCHCHC) provides a seamless system of access to high quality, cost effective healthcare and wellness programs to an ethnically diverse community in South Los Angeles. HCHCHC continues to offer a full range of services which include adult and pediatric primary care, urgent care, specialty care and ancillary services. Today, HCHCHC has established a culture that champions patient-centered care, promotes patient engagement and welcomes community partnership and strategic alliances.





administrative staff



Michael Mills, MHA
Administrator



Rona Molodow, MD, JD
Medical Director



Jerri Flowers
Assistant Administrator



Connie Youn, RN, MBA
Nurse Manager

special projects & accomplishments

community garden

Within our Hudson community, there is a high prevalence of obesity, diabetes and other diseases related to lifestyle. Living in an area surrounded by popular fast-food chains can often make it difficult to choose healthy meal options. The Weigh-To-Go and the Health Literacy Series programs, at Hudson CHC work to educate our patient community about how to achieve and maintain healthy lifestyles. To aid in our initiative to improve patient health outcomes, we have partnered with our USC student volunteers to build a community garden. Our project goals are to provide our community with greater access to fresh, affordable food; promote sustainability and green initiatives; encourage children to eat more fruits and vegetables; and help bridge the link from "farm to fork."

"every woman counts" cancer detection program

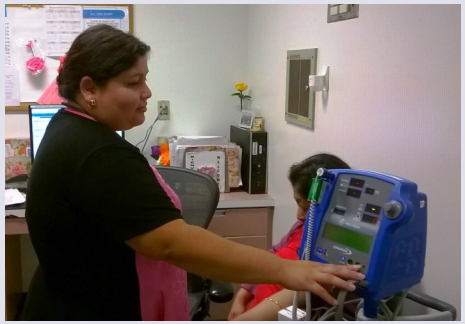
H. Claude Hudson has been recognized by the California Health Collaborative (CHC) for providing Every Woman Counts (EWC) early breast and cervical cancer detection services since 1997. The highest volume of EWC patients in all of Los Angeles County and possibly in all of California are seen at our center. EWC has a data entry component which is different from any other state program. Clinical data must be submitted online for every patient seen. Despite the large volume, Hudson CHC completes data entry on time and accurately. Additionally the EWC CHC Clinical Coordinator emphasizes that Hudson "meets all clinical standards of the program and is a model for all other providers."

project ayuda

The National Association for Hispanic Elderly (NAHE) – Project Ayuda has provided job opportunities to older workforce members for over 30 years, promoting workplace diversity and empowerment. For 25 of these 30 years, Project Ayuda has been an integral part of workplace operations at Hudson. NAHE serves over 1,200 older workers annually, with more than 76% of the participants representing minority groups. At the same time, Project Ayuda staff develop and refine their work-related skills, Hudson CHC appreciatively benefits from their dedicated service.

continuing care and general relief clinic (CCGRC)

The Hudson CHC Continuing Care and General Relief Clinic (CCGRC) strives to serve the needs of two DHS patient populations: Department of Public Social Services General Relief applicants and continuing care patients who do not qualify for ACA coverage. Since its opening, the CCGRC has proven to be an invaluable resource for both patient groups.





2015/2016 objectives

- Improve HEDIS and DSRIP scores
- Expand Urgent Care Unit
- Expand Patient-Centered Medical Homes
- Enhance Exam Rooms
- Install HVAC Air System
- Improve Call Center Statistics
- Establish Integrated Behavioral Health Program

Hubert H. Humphrey

Comprehensive Health Center

Hubert H. Humphrey Comprehensive Health Center (HHHCHC) is now the largest primary care clinic site for DHS with over 68,000 empaneled patients. This past year has been a tremendous year of growth and change. Humphrey has built a mini-medical neighborhood which improves access and capacity for patients. We are also proud of the fact that like other DHS facilities, Humphrey staff has successfully transitioned from paper medical records to ORCHID.



urgent care provider transition

On July 1, 2014, Humphrey officially assumed the operations and staffing of the HHHCHC Urgent Care Clinic (UCC). After having Emergency Medical Associates manage and staff the UCC for 4 years, this was a major operational transition and highlights our confidence to recruit and manage the urgent care. UCC operates sixteen hours per day, seven days per week, including holidays, so this transition was significant. We now employ three full-time UCC providers, one physician and two nurse practitioners and contract with several part-time physicians and mid-level providers to provide coverage for all shifts. A few PCMH providers cover additional shifts. Fortunately, there has not been any disruption in service. Since implementing ORCHID in February, the number of patients seen has increased to the pre-ORCHID level and the urgent care treats approximately 2,200 patients a month, for an average of 70 per day.



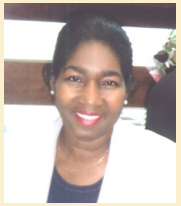
administrative staff



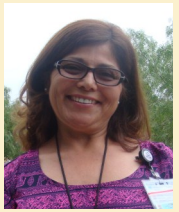
Alexander Li, MD
Interim Administrator



David Campa, MD
Interim Medical Director



Norma Haye, RN
Nurse Manager



Mary Ann Moreno, RN
Nurse Manager

a mini-medical neighborhood at humphrey comprehensive health center

There is now a mini-medical neighborhood in Hubert Humphrey CHC! Thanks to former Supervisor Yvonne Burke and Supervisor Mark Ridley-Thomas's support to remodel and expand Humphrey's urgent care space, the Humphrey staff were able to re-purpose the old urgent care space to create a mini-medical neighborhood that now contains the Continuing Care, General Relief Assessment, Nurse-only, and Pharmacist clinics. These services are all within close proximity to the urgent care, laboratory and radiology. The Continuing Care Clinic (CCC) serves patients identified by Humphrey's Urgent Care staff who have no insurance and do not have a primary care provider. Care is provided by a physician who serves as the regular provider until their health care needs are met or they are linked to a primary care provider. Patient centered care is provided to patients with ongoing or chronic health care needs which is more beneficial than seeking care through an urgent care or emergency room.

the general relief clinic

The GR clinic is adjacent to the CCC clinic and was established in collaboration with DPSS. The GR team assesses and completes the necessary paperwork for those seeking medical assessments for functional ability. Given the strict turnaround time to complete the GR paperwork (<30 days from when the patient receives the application) and the patient's concern regarding obtaining the required paperwork to receive a determination of their benefits, these services greatly improve the patient's experience and satisfaction. When no shows occur in the CCC and GR clinics, the CCC and GR staff will see patients from the urgent care.

the nurse-only clinic

The Nurse-Only Clinic offers empaneled patients with another venue for follow-up needs. The nurse provides services such as vaccinations or post-visit follow ups that do not require a visit with the primary care provider. Humphrey is proud of its mini-neighborhood that not only seeks to provide quality and customer/patient-centered services, but ultimately helps with access and a superior patient experience.

the dental clinic

The Dental Clinic at Hubert H. Humphrey continually strives to provide the best care for their patients. In 2015, the installation of a digital panoramic x-ray system improved the level of dental care by providing higher quality images and increasing the overall efficiency in the clinic.

DHS's first pharmacy clinic

As of February, 2015, Hubert H. Humphrey CHC patients began taking advantage of DHS' first-ever pharmacist run clinic! The clinical pharmacist assists in enhancing the efficiency of our urgent care and patient-centered medical home capacity as well as improving the patient experience. For example, patients who run out of medication are able to obtain same-day appointments without having to wait long hours in the urgent care, take up a primary care appointment for prescription refills or go for a period of time without their medications.



The clinical pharmacist works under a collaborative practice agreement . She reviews medication histories, reviews pertinent lab values, and counsels patients on their medication regimens. Medications are provided to maintain the patient's medication schedule until the next provider appointment. When necessary, labs are ordered and the clinical pharmacist consults with providers to optimize medication therapy. So far, over 600 patients have taken advantage of our new pharmacy service!

clinic objectives

- Provide a safe and effective pathway for patients to obtain chronic medication renewals
- Ensure patients are on optimal medication regimens (reduce polypharmacy)
- Improve medication adherence through education and support
- Reduce risk of adverse medication events

proposed next steps

- Participate in medication dosage optimization and in the management of chronic controlled medications for PCMH patients
- Provide consultation for patients on complex medication regimens
- Assist with on-boarding of new patients to serve as a bridge between patient and their primary care provider by reviewing appropriateness and safety of medication regimens and suggesting formulary alternatives
- Spread the Pharmacy Clinic model to other DHS ambulatory facilities



Long Beach

Comprehensive Health Center

Long Beach - Wilmington - Bellflower

With the successful implementation of Los Angeles County's electronic health record "ORCHID" completed at the Coastal Health Centers, we look forward to the new opportunities available to our clinicians, patients and staff in utilizing the benefits of the improved technology.
Patients are already experiencing improved follow-up and communication across our clinics, specialties and hospital networks. We also have improved our ability to phone in prescriptions as well as shown improvements in identifying patients who could benefit from our case management services.
This coming year appears full of opportunity to continue to develop our clinics and we look forward to sharing improved processes with our patients, clinics and community.
Our future initiatives include expansion of our PCMHs, complete conversion of digital radiology and continued efforts to improve patient experience, clinic efficiency and quality patient care.





administrative staff



Jeffrey Barbosa, MD
Director



Thuy Banh
Assistant Administrator



Tyler Seto, MD
Associate Medical Director



Marion Thornton-White, RN
Nurse Manager

special projects & accomplishments

In November 2014, Coastal Health Centers, along with Harbor-UCLA Medical Center, were the first group of DHS facilities to go live with the new electronic health record ORCHID. After months of preparation and training, our health centers successfully transitioned staff and patients onto the new system and have been working diligently to implement and refine new clinic workflow processes.

As part of this monumental effort, many of our ancillary and support systems were also upgraded to reinforce ORCHID, including the installation of new digital mammography and digital dental x-ray units, the implementation of a DHS-wide electronic credentialing system, Cactus, and the addition of e-prescription through ORCHID. The clinics also installed new Wi-Fi, computer equipment and printers.

Other efforts during FY 2014-2015 include infrastructure upgrades that support the expansion of PCMH, such as repurposing additional clinic space at Long Beach Comprehensive Health Center. As part of the effort to improve the patient experience the second floor registration area at Long Beach underwent a complete remodel while Bellflower and Long Beach Health Centers received new waiting room furniture.

As we begin a new year, Coastal Health Centers will continue to work on initiatives to optimize clinic flow, transition remaining paper-based systems to electronic systems, expand patient access to primary care, specialty care and diagnostic services and improve patient satisfaction and experiences.

2015/2016 objectives

- New clinic suite opening at Long Beach
- Patient-Centered Medical Home expansion
- Continuing Care Clinic expansion at Long Beach
- Eye photo expansion to Bellflower Health Center
- Digital Radiology conversion of X-Ray room
- Care Improvement Teams / Lean Six Sigma Process Improvement Projects to improve clinic efficiency
- Health Information Management (HIM) reduction of onsite medical records files
- Voice Over Internet Protocol (VOIP) telephone system implementation
- Customer Service/Patient Experience projects





Mid-Valley

Glendale —San Fernando—Vaughn School-Based Clinic

This year was marked by a massive increase in patient assignments, empaneled patients, and significant staffing challenges. Despite the increase in volume, staff rallied to absorb over 10,000 new patients to our network while constantly providing exceptional medical care and service.

Mid-Valley CHC continues to serve as a primary care training site for Olive View-UCLA Internal Medicine residents and UCLA Family Medicine residents. UCLA medical students, International Medical Graduates program students, Western podiatry students, LA County and UCLA nurse practitioner students also rotate through clinics located at Mid-Valley and San Fernando. Our ongoing relationship with UCLA has assisted in successful recruitment of both nurse practitioners and physicians.

Due to construction of the new San Fernando Valley Family Support Center (SFVFSC), the annual October Community fair was held on the top level of the new parking structure. Despite the heat, hundreds turned out for a well-organized and fun Halloween-themed event that benefitted our community by providing flu vaccines; blood pressure, vision, and glucose screenings; information on social services and housing, family planning and women's health, healthy eating and nutrition, smoking cessation and much more. Participants received giveaways donated by multiple organizations.



administrative staff



Joseph Blank, MD
Director



Siamak Basiratmand, MD
Assistant Medical Director



Jacqueline Cope, MD
Assistant Medical Director



Linda Kim-Fung, RN
Nursing Director

annual staff and family event

The fourth annual staff and family gathering was held on August 29th at Will Rogers State Beach. This potluck event has grown in attendance annually.



san fernando valley family support center

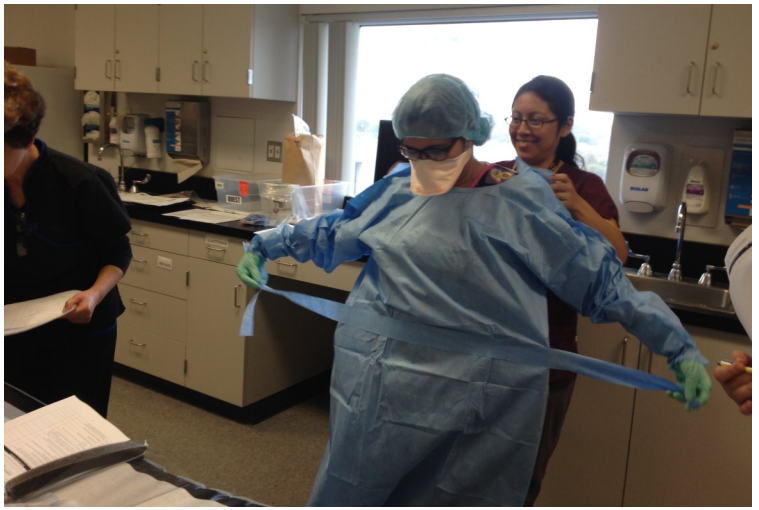
The SFVFSC complex will house members of the following county departments: DPSS, DCFS Child Support Services, Probation, DPH, DMH, and DHS. This integrated campus will allow greater opportunities to collaborate with other county departments on both direct and system-wide efforts. The parking structure, with 1325 new parking spaces, is already being utilized by staff and patients. Following completion of the new building in September 2015, the Mid-Valley pharmacy and call center was relocated to the new building. The vacated space will allow for three additional PCMH and help accommodate our expanding patient population. We are looking forward to another extraordinary year anticipating the challenge of restructuring our clinic flow while converting from paper documentation to a seamless ORCHID medical record.

special projects & accomplishments

- Abrey Lopez, DDS received the Henry Schein Cares grant providing $10,000 worth of dental and medical supplies to Mid-Valley, annually for two years. The grant can be renewed in two years, benefitting our patients and Los Angeles County for years to come
- Nursing completed implementation of a scanning process for laboratories that dramatically reduced transcription order errors
- Care Improvement Teams made significant improvements with registration and pre-registration, the appointment desk and member services
- The Musculoskeletal clinic staffed by Daniel Vigil, MD, a Family Medicine Sports Medicine physician, integrated a Physical Therapist into their outpatient orthopedic assessments, treatment plans and patient education. Integrated physical therapy is the first of its kind in Los Angeles County DHS. This multidisciplinary approach has been well-received by our patients

2015/2016 objectives

- Implement ORCHID and transition from paper-based to Electronic Health Record
- Move call center and pharmacy to new San Fernando Valley Family Support Center building next door to Mid-Valley. Create more clinic space in the space vacated by pharmacy and increase the number of PCMH teams
- Improve clinic flow and utilize certified medical assistants in front offices
- Certify Mid-Valley as a loan repayment program site to increase physicians, and/or nurse practitioners and dentists



Edward R. Roybal

Comprehensive Health Center

rising to the challenge — improve patient experience

"A growing body of research shows conclusively that the physical environment of health care facilities affects patients, staff and families by impacting patient safety and quality of care" (California HealthCare Foundation, March 2009). A "Clinic Refresh Project" was implemented by DHS in 2013 to improve the physical environment in all of the DHS outpatient facilities. At Roybal CHC, we transformed our clinic waiting areas into a non-traditional style to replace our institutional facility environment. Improving interior aesthetics was one of the top priority projects at Roybal CHC. The "Clinic Refresh Project" consists of the following:

- Improved the ambience of all of our clinics' waiting area by replacing our old furniture
- Removed our old signage and changed to clear and directional information-al signs for the convenience of the patients
- Introduced a new color palette to create a well coordinated look with our furniture. Colors ranging from earth tones to bright prominent shades were chosen
- Wi-Fi was installed for patients to have internet access in the waiting area
- The addition of live houseplants in the clinic areas





administrative staff



G. Michael Roybal, MD
Medical Director



J. Michael Allevato, MD
Associate Medical Director



Debbie Duran, RN
Nursing Director

putting employees first to improve the patient experience and satisfaction

Culture lays the foundation for patient experience. We strongly believe that providing good customer service and improving the patient experience happens when we improve the staff experience and wellbeing. "If our staff are happy, our patients are happy." The Roybal CHC Well-Being Committee was established for this purpose with Crystal Diaz, MHA, as the executive sponsor. The committee consists of volunteer employees from every department whose assigned duties include membership on the committee. The committee members are Crystal Diaz, Barbara Dominguez, Lynette Gaston, Lourdes Guerra, Anthony Jones, Rosemary Llamas, Bertha Munive, Victor Pena, Elva Silva, Tuan Trinh and Sonia Urbina-Felix.

The committee was implemented in January 2015 and is charged withholding activities to improve employee morale and engagement. The activities included:

Jan 30 – Jersey Day
Feb 13 – Valentine-gram
Feb 20 – Black History Luncheon
April 13 – Dodger Dog Sale
May 5 – Cinco De Mayo Celebration
May 9 – Mother's Day Raffle
May 29 – ORCHID Go-Live Coffee and Donuts
June 19 – Father's Day Raffle



Roybal CHC Wellbeing Committee's efforts include the promotion of physical health at work. To counteract the effects of working eight hours a day sitting and staring at the computer, the committee surveyed the employees on their wants and needs with respect to their wellbeing and as a result introduced the "Walk-Around the World" program and a Zumba Class. More than 100 employees formed teams with up to 10 people. The number of miles each team member walked and the team as a whole walked was tracked weekly.






County of Los Angeles
Commendation
Sheryl Paul
RN, BSN
County of Los Angeles
Commendation
County of Los Angeles
Commendation
Henry Chendra
RN
County of Los Angeles
Commendation
Kathleen Egan
RN, MSN





Outpatient Center



Martin Luther King, Jr.
Outpatient Center

Dollarhide

Martin Luther King, Jr. Outpatient Center

It has been an amazing year of new beginnings since the June 17, 2014 move to the new Martin Luther King, (MLK) Jr. Outpatient Center. Shortly thereafter, preparation for the implementation of the online medical record system (ORCHID) began. The MLK Jr. workforce worked diligently with the Cerner Corporation and the DHS ORCHID team to ensure a seamless transition into the new system. Implementation of ORCHID on February 1, 2015, was a huge success. There were a few glitches that were quickly resolved thanks to the well-trained ORCHID super users and subject matter experts.

The MLK Jr. campus expansion continued with the opening of the Martin Luther King, Jr. Mental Health Urgent Care Center on September 4, 2014. This 24-hour/7-days-a-week facility provides intensive crisis services to individuals 13 years and older who would otherwise be taken to or access care in emergency rooms. The 131-bed MLK Jr. Community Hospital had a "soft opening" in May and opened the Emergency Department in June. Following the successful accreditation process, the hospital officially opened it's doors on July 2nd We look forward to opening the Martin Luther King, Jr. Recuperative Care Center on our campus. Here we will provide homeless individuals recovering from an illness or injury time to convalesce, and then will work to transition them to permanent housing. The Outpatient Center is an invaluable community resource and is leading the way towards better community health by delivering great outpatient care. Relationships between inpatient and outpatient services have been enhanced and strengthened with the newly opened Martin Luther King, Jr. Community Hospital next door.



administrative staff



Mark Ghaly, MD
Deputy Director
Community Health



Cynthia M. Oliver
Chief Executive Officer



Ellen Rothman, MD
Chief Medical Officer



Lessie Barber, RN
Nursing Director

partnerships

This past year has been marked by incredible partnerships. MLK Jr. Outpatient Center continues to build integrated partnerships with our DMH colleagues. The DMH Integrated Behavioral Health clinic allows our teams the opportunity to provide whole person care improving one's mental and physical well-being. In September 2014, the MLK Jr. Mental Health Urgent Care was welcomed on campus. The PCMH team and Women's Health team provide integrated medical services to clients receiving continuous mental health care at the new center. Recently we launched another co-location program at the Pediatric Hub. Since the May opening of the new MLK Jr. Community Hospital, the MLK Jr. Outpatient Center has accommodated more than 250 patients for medications and outpatient follow-up. Our DHS IT team provided fantastic support with this project, ensuring that Cerner communication was available for electronic transmission of patient information in time for the big opening.





Dollarhide health center

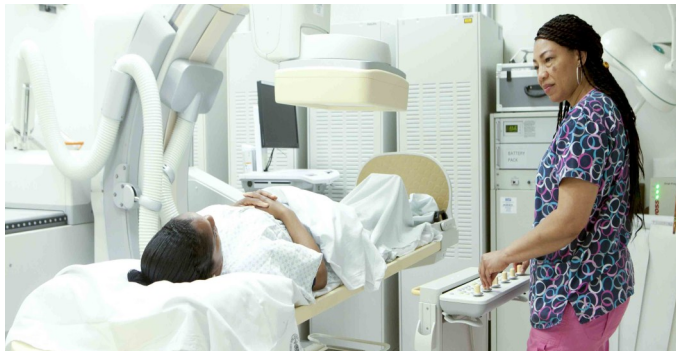
Dollarhide Health Center provides high quality health care services to patients residing in the City of Compton and surrounding communities. The Health Center offers primary care services to pediatric and adult populations. Patient care is delivered by a multi-disciplinary team committed to wellness and disease prevention. In February, the Dollarhide clinic shared in the success of the ORCHID implementation. The clinic is home to a highly active Care Improvement Team (CIT) that consistently sets high expectations for workplace improvement. The Dollarhide DMH co-location continues to support a model of integrated wellness. To ensure that patients understand their treatment plans and goals, diabetes education sessions led by our nursing team, were launched.

Dollarhide Health Center

1108 North Oleander Avenue
Compton, CA 90222

Dewier Bynum
Administrator

Jasmine Eugenio, MD
Medical Director



care improvement team highlights (CIT)

A total of 22 departmental teams completed numerous quality improvement projects. The teams participated in monthly CIT Counsel Meetings and led the charge to create a culture of continuous quality improvement.

Oral/Maxillofacial Surgery: Reduced wait time between registration and obtaining vital signs from 22 to 8.4 minutes

Hematology/Oncology: Reduced wait time between registration and obtaining vitals from 23 to 3 minutes

Rehabilitation Medicine: Increased the percent of patients who see their provider within five minutes of their scheduled appointment from 62% to 80%

Environmental Services: Developed new process for cleaning restrooms and reduced cleaning time from 20 minutes to 13 minutes

2015/2016 objectives

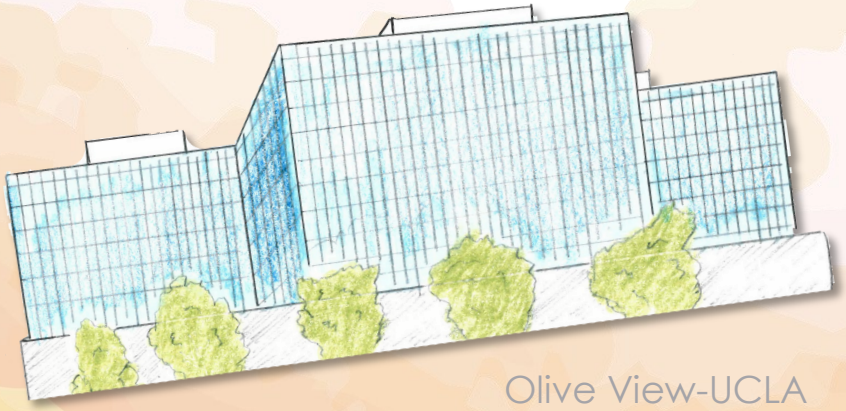
- Pediatric Hub Expansion
- Patient Safety program
- Construction of a 1200-space parking structure for patients and visitors






UCLA
BRUINS

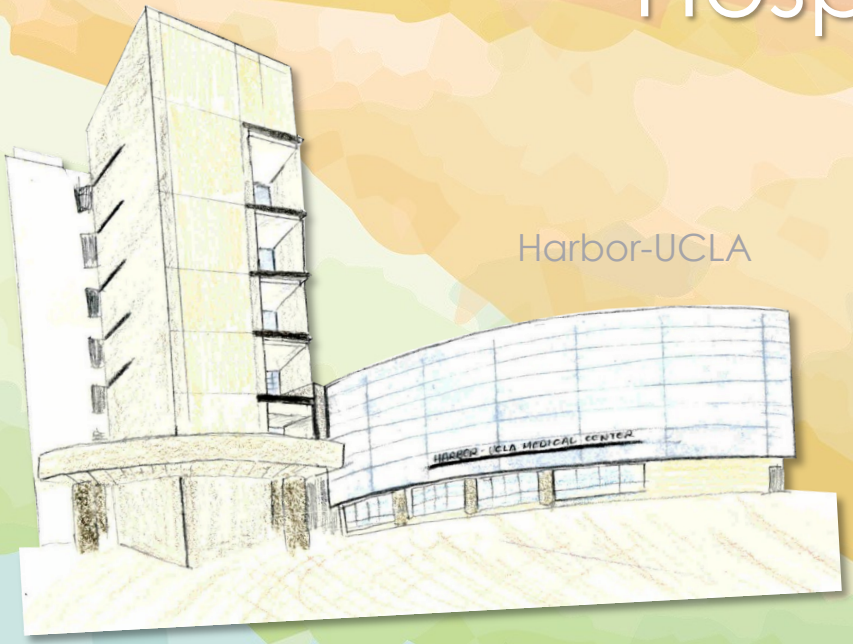
Hospitals



Olive View-UCLA



LAC+USC



Harbor-UCLA



Rancho Los Amigos
National Rehabilitation
Center

Harbor-UCLA Medical Center

The past year was an exciting and historic one at Harbor-UCLA Medical Center (MC). In November 2014, Harbor-UCLA MC became the first DHS hospital to implement ORCHID, DHS's new system-wide electronic health record system. ORCHID facilitates sharing patient information across the DHS system and will allow patients to access health information online for the first time via the "My Wellness" portal .

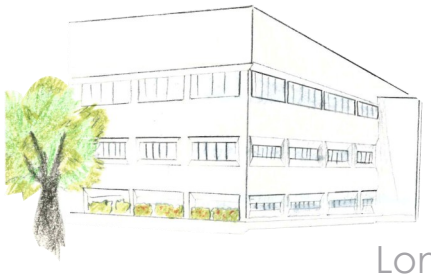
We celebrated our first year in the new Surgery/ Emergency Building. Having a brand new facility for these services has greatly improved the patient's experience.

We are continuing our journey to become a "Lean" organization. This year we successfully implemented process improvements in the Eye Clinic and began new projects in the Family Medicine and Internal Medicine Clinics. These initiatives are being expanded throughout the entire hospital.

This year also saw the start of construction on the Psychiatric Emergency Room expansion, which will double the size of the area and increase our capacity to treat adult and adolescent patients with emergency mental health needs.

With a vision to the future, we have initiated our master plan to build a modern replacement hospital and ambulatory care facilities.

These milestones would not have been achieved without the staff's commitment to providing excellent and compassionate care to our patients and the community.



Lomita



administrative staff



Kimberly McKenzie, RN, MSN
Interim Chief Executive Officer/
Chief Nursing Officer



Tim Van Natta, MD
Chief Medical Officer



Azar Kattan
Chief Administrative Officer



Patricia Soltero, RN, BSN
Interim Chief Nursing Officer



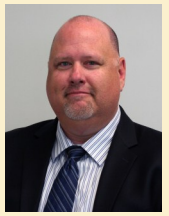
Jody Nakasuji
Chief Financial Officer



Susan Black, RN
Chief Innovation Officer



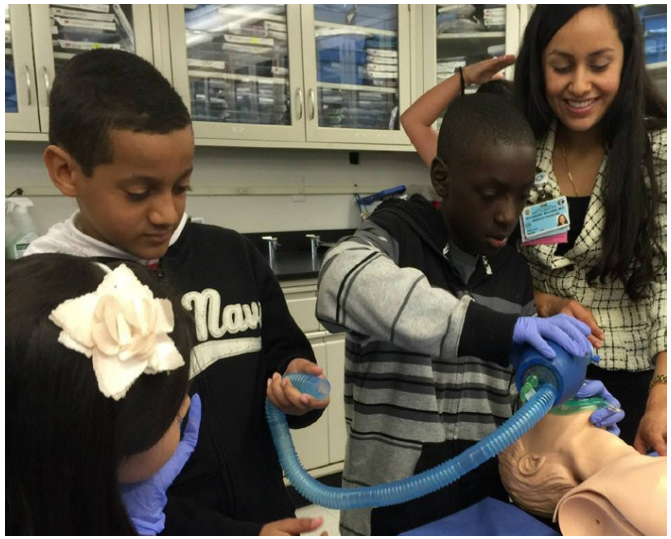
Clinton Coil, MD, MPH
Chief Quality Officer



Brant Putnam, MD
President
Professional Staff Association

special projects & accomplishments

- The Family Medicine Residency Program received the California Academy of Family Physicians' 2015 "Patient Centered Medical Home Practice of the Year Award" for its Transforming Primary Care Fellowship
- Two new state-of-the art da Vinci Robots, were put into practice as part of the robotics program; these robots are used to perform very delicate surgeries and greatly improve patient recovery and healing times
- Harbor–UCLA MC was recognized by OneLegacy with its "Process Excellence" honor for the number of eligible organ donors in the year, attaining a 75% or higher conversation rate, and maintaining a successful donation after cardiac death program
- A new program was created that uses art as part of the patient care process and to stimulate a healing environment for patients
- A new Safe Patient Handling and Mobility Teams program was started to assist with repositioning and movement of patients to ensure staff and patient safety





improving patient experience

Harbor-UCLA Medical Center has renewed its focus on the empanelment of patients and growing the PCMH.
Our Ambulatory Care team also developed new approaches to improve the transitions between primary care, specialty care and the Emergency Department.
A new Continuing Care Clinic was created to provide continuity and coordination of care for non-empaneled patients with active medical problems until they are assigned a primary care provider. We also were successful in improving the hospital's HEDIS measures for preventive screening rates in 2014.

becoming a lean hospital

At Harbor-UCLA Medical Center we are building a culture of continuous improvement. Working with our partners at Toyota, the Kaizen Promotion Office led efforts to spread positive changes achieved in one of our specialty clinics to other areas of the hospital. One effort centered on making sure staff have the supplies when and where they need them in the right amounts so that staff doesn't waste valuable time searching for the right supplies. In addition to saving time, supply chain acquired better control over its inventory, saving $21,000 in just one department. To efficiently lower costs, these efforts are being applied throughout the inpatient areas.
Harbor-UCLA MC is also working to improve primary care using the Lean principles. By applying these principles, staff is able to identify waste, standardize processes, and put into place sustainable changes in how care is delivered to improve the patient experience. Recently, Harbor-UCLA MC received a $750,000 grant from Unihealth to further imbed the Lean performance improvement methodology into the organization.

2015/2016 objectives

Improve Patient Experience

- Improve Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) top box scores for hospital staff responsiveness and hospital environment domains by 10%
- Implement Customer Service Training across the hospital for all front-line staff

Improve Patient Safety

- Improve performance on stroke measures
- Decrease hospital mortality

Improve Patient Outcomes

- Implement broader multi-disciplinary care coordination efforts
- Increase number of patients enrolled in case management

Financial

- Reduce inpatient denied days by 10 percent

LAC+USC
Medical Center

Mission: To provide fully integrated, accessible, affordable, and culturally sensitive care one person at a time

Vision: To be nationally recognized for our superior patient care, medical education, clinical research and contributions to the community

This year brought a new level of energy to the hospital as we successfully implemented our hospital-wide electronic health record, further progressed in developing our primary care clinics into Medical Homes, improved how patients schedule outpatient appointments by developing a robust Access Center, and started new programs in women's health that will soon allow OB/GYN providers to become Woman Centered Medical Homes as well as integrating behavioral health services to assist pregnant women combating depression.





LAC+USC primary care

LAC+USC Primary Care is committed to transforming our existing clinics into top-tier, formally certified, Patient Centered Medical Homes (PCMH). In our collective efforts over the last year, we are excited to report major strides on several fronts.

access

Access takes many forms, but a fundamental measure of a PCMH is how well it facilitates encounters between patients and the care team. Several initiatives promise to improve our access dramatically. We have adopted Patient Centered Scheduling, consolidated to three appointment types and added same day access. We created phone trees in our Adult and Pediatric Clinics with an option for our patients to directly connect to a clinic nurse if they need advice or triage. Our Diabetes Retinal Camera appointments provide standard of care screening for our adult patients without having to leave the medical home. Scheduled phone visits allow us to conduct productive clinical encounters while reducing our patients' sacrifices in time and transportation. Finally, we welcome a major shift in our regular appointment access: full day sessions for our Adult Medicine Resident Clinics which brings us even closer to our ultimate goal of true open access.

administrative staff



Daniel Castillo
Chief Executive Officer



Brad Spellberg, MD
Chief Medical Officer



Isabel Milan, RN
Chief Nursing Officer



Henry Ornelas
Chief Operating Officer



Mark Corbet
Chief Financial Officer

space

We hope to capture a renewed sense of warmth and openness with the major renovations planned for our Adult Medicine Clinics in the OPD Building. We intend to redesign our space around the whole patient. The renovation we seek is not a matter of touching up simple wear and tear – we embrace this opportunity to make a house that is truly patient-centered in design so that the structure and layout improve communication, patient orientation, access and overall clinic flow.

team based care (relationships)

A house — no matter how open, well constructed, or fitted — is not a home without the people who make it one. Our highest priority therefore continues to be the relationships between our patients, providers, nurses and staff. We have created team models which facilitate relationships and create a sustaining, patient-centered family for all the patients who call us home. We have established monthly clinic meetings, weekly nursing educational meetings, resident "practice partners" weekly meetings with the USC Department of Medicine and Pediatrics leadership, and we are working with the TeamSTEPPS consultants on a program designed to improve communication and teamwork.

technology

As we went live with our new Electronic Health Record (EHR), we have spent the last few months focused on preserving the quality of care and patient safety during our transition to ORCHID. Specifically, we have worked to introduce new workflows that enhance safety and patient-centeredness. We have already noticed gains in efficiency and connectivity, especially with our abilities to message within the EHR and prescribe medications electronically. We have also directed our attention to our existing phones and voice messaging system, creating new simplified phone trees, added a Voice Over Internet Protocol (VOIP) phone system for direct access to Nursing, and have identified tablets which will be utilized to link patients to community resources.

The department of women's services

The Department of Women's Services at LAC+USC Medical Center is actively engaged in improving the care of our patients and community. This fiscal year Women's Services has provided approximately 34,000 patient visits. These visits included gynecological oncology, family planning, high risk obstetrics, women's mental health and fertility services. The department has incorporated mental health treatment into the multidisciplinary clinics for pregnant women which also includes the availability of specialists for neurology, diabetes, thyroid disease and cardiology. There are several on-going projects highlighting the importance of awareness and mental health treatment during the perinatal period. Women's services also work in partnership with Lynwood Correctional Facility for Women to provide obstetrical and gynecological services to incarcerated women. The department sends a physician once a week to Lynwood Correctional Facility to streamline the care for the High Risk OB patients. The communication between the Jail providers and LAC+USC Medical Center's High Risk OB clinic is enhanced.
The Department of Women's Services actively worked in collaboration with the Department of Pediatrics, DHS and the community to maintain the Baby Friendly Hospital Designation and to promote the lifelong benefits of breastfeeding. Clinical faculty focus on improving quality metrics such as decision to incision time, patient satisfaction, and Healthcare Effectiveness Data and Information Set (HEDIS) scores. Also, Women and Pediatric Services' staff have been commended for their efforts in maintaining compliance with the regulations relating to the quality, timeliness, and completeness of the specimen collection for Newborn Screening. The Department of Women's Services is dedicated to enhancing integrated patient care delivery and continues to strive for excellence.

diabetic retinopathy

Diabetic Retinopathy is the single most devastating eye problem we encounter, both in volume and in severity. Because of this, education about diabetes and its effects on the eyes has become a major emphasis in our clinic. Flora Molina, R.N. has been instrumental in establishing and maintaining this program. Among other accomplishments, our department is consistently ranked among the Top Ten training programs in the nation and was voted Consult Service of the Year by the Emergency Department at LAC+USC.
Our primary objectives for the upcoming year are to improve the efficiency of our clinic through changes in scheduling and to streamline the process of getting our patients in need of surgery to the operating room. These measures will not only enhance the service to our patients but also bring about a significant cost savings in the delivery of ophthalmic care. Our entire staff is dedicated to providing excellent care through a team driven approach.

2015/2016 objectives

- Improve access to outpatient primary and specialty services
- Manage the increased volume of eConsults for specialty services
- Decrease the average length of stay in a hospital bed
- Reduce both inpatient medical and psychiatric denied days while managing the backlog of Interqual reviews
- Improve performance on all HEDIS metrics used by health plans
- Meet or exceed all National Patient Safety Goals
- Reduce assaults on staff
- Improved the patient experience


EXIT










EXIT


Leica

Olive View-UCLA Medical Center

This year has been one focused on improving quality of care, innovation and preparation for changes in our health care systems and delivery standards. Our hospital was a leader in the successful implementation of several Medicaid 1115 Waiver projects, including sepsis surveillance and treatment, prevention of hospital-acquired infections and venous thromboembolisms, and interventions to reduce the incidence of surgical site infections and central line associated bloodstream infections.
Olive View's primary care and specialty care services implemented contemporary programs to meet our patients' complex medical needs. The Department of Neurology established a "Code Stroke" program to conduct early screening of patients at risk for stroke.





The Departments of Pediatrics and OB/GYN joined together to initiate Breastfeeding Support Groups, and the Department of Anesthesiology created a Thoracic Epidural Service. Each of these new programs have made the delivery of health care services at Olive View increasingly more accessible and effective. Continuous quality improvement is always a driving force encompassing all of our programs and initiatives.

administrative staff



Carolyn Rhee
Chief Executive Officer



Shannon Thyne, MD
Chief Medical Officer



Dellone Pascascio, RN
Chief Nursing Officer



Niloo Shahi
Chief Operating Officer



Anthony Gray
Chief Financial Officer



Susan Aintablian
Chief Information Officer



Thomas Beggane
Personnel Officer

special projects & accomplishments

- The Pediatric Clinic underwent a Lean Six Sigma project to improve patient check–in and discharge times. Average check-in time was cut from 12 minutes to 2 minutes for scheduled patients and from 12 minutes to 5 minutes for walk-in patients. The check-in efficiency rate rose from 15% to 100%. The discharge processing time was reduced from 26 minutes to 5 minutes for physician disposition and 10 minutes for MD/RN disposition. The efficiency rate rose from 4% to 90%
- Launched DHS' first Women's Centered Medical Home
- Drs. Caitlin Reed, Suzanne Donovan and Matthew Waxman traveled to West Africa to assist in international efforts to care for victims of the Ebola Outbreak
- Numerous Departments joined together to mobilize and develop policies and procedures for the care of Ebola patients
- Instituted a Medi-Cal Managed Care Infrastructure Improvement Committee to increase our focus on patient centered care
- Implemented a Safe Patient Handling Program that initiated "Patient Lift and Support Teams" as well as the allocation of new state-of-the-art patient lift equipment
- Actively participated in the DHS effort to standardize hospital emergency codes across all County facilities
- The Department of Pathology participated in the UCLA PreMedical Enrichment Program, a seven week summer program (UCLA PREP) held annually to prepare promising disadvantaged pre-medical and pre-dental students for professional training and careers in medicine and dentistry

Continuing our tradition of being a leader in patient and staff safety remains a high priority. Through clinical approaches such as ultrasound-guided regional anesthesia, simulation drills, and an aggressive hand hygiene campaign, we strive to provide a safe health care environment for everyone.
This year was also very important because Olive View broke ground on the construction of a new Psychiatric Emergency Room (ER). The new space will be approximately 9,400 square feet and provide 2 additional holding areas, allowing a total capacity of 23-patient stations, a centralized nursing station, 4 seclusion rooms, and other support functions, including a medication room, storage, an office, and restrooms. The existing Psychiatric ER space is chronically overcrowded and not conducive to quality patient care. The August 2015 opening has dramatically improved patient observation and safety.
Additionally, Olive View continues to transform itself for the new DHS-wide electronic medical health record system known as ORCHID. Our IT infrastructure, clinical workflows and patient care standards are being fine-tuned to ensure accountability and high quality care, while simultaneously bringing efficiencies to our overall patient-centered flow and health care delivery workflow. When ORCHID went live on November 1, 2015, Olive View's staff, patients and partners were ready!



Rancho Los Amigos

National Rehabilitation Center

Rancho Los Amigos National Rehabilitation Center (Rancho Los Amigos) is currently undergoing a $418 million renovation and campus beautification project – Rancho Rising 2020: Building on our History of Hope and Healing. Long a source of pride for the Downey community and a jewel of the County of Los Angeles' Department of Health Services, the much-needed renovation secures Rancho Los Amigos' future as one of the top-ranked rehabilitation hospitals in the nation, with technologically-advanced facilities and increased accessibility for patients and the surrounding community. Construction consists of a new Wellness & Aquatic Therapy Center, new outpatient facilities and an inpatient expansion to improve seismic safety. Rancho Los Amigos staff members are also working to ensure the bright future of our organization. The Sepsis Incentive Group has saved approximately 30 lives over the past four years, and since the inception of our Falls Prevention Program, staff members have prevented more than 100 additional falls on our campus.

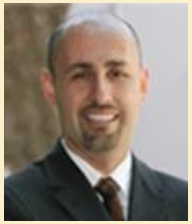




improving the patient experience

- One of Rancho Los Amigos' priority strategic planning goals is to enhance patient experience through the use of AIDET (Acknowledge, Introduce, Duration, Explanation, Thank You) as well as improve communication and hourly nurse rounding.
- Rancho Los Amigos is undergoing a $418 million renovation and campus beautification project to construct a new Wellness & Aquatics Therapy Center, new outpatient facilities, and a new inpatient expansion. The needed renovation secures our future as one of the top-ranked rehabilitation hospitals in the nation with technologically advanced facilities, expansion of clinical research and initiatives and increased accessibility for patients and the surrounding community.

administrative staff



Jorge Orozco
Chief Executive Officer



Ben Ovando
Chief Operations Officer



Mindy Aisen
Chief Medical Officer



Aries Limbaga
Chief Nursing Officer



Robin Bayus
Chief Financial Officer

special projects & accomplishments

- Rancho Los Amigos was designated a level 4 epilepsy center, the highest accreditation level possible, by the National Association of Epilepsy Centers (NAEC)
- Held its first annual bioethics conference, which helped to provide tools for "facilitating the discussion of Healthcare Dilemmas." More than 50 staff members from across the Department of Health Services were in attendance
- Named as an LGBT Healthcare Equality Leader by the Human Rights Campaign. This recognition is the result of Rancho Los Amigos' policies and practices related to the equity and inclusion of LGBT patients, visitors and employees
- The Las Floristas Pediatric Scholarship Program at Rancho Los Amigos has helped to provide more than 30 patients the opportunity to pursue higher education
- Awarded a $250,000 grant from LA Care to expand its current KnowBarriers Peer Mentoring Program. Peer mentors will conduct community outreach, provide direct patient support, as well as participate in home visits and utilize telemedicine, in order to help prevent the incidence of pressure sores, depression, expensive hospitalization and surgical repair for Spinal Cord Injury patients



improving patient safety

This year Rancho Los Amigos embarked on an initiative to decrease falls, hospital acquired pressure ulcers and medication error rates. As a result of interdisciplinary collaboration, our hospital has reduced falls by more than 70%, decreased hospital acquired pressure ulcers by 57% and reduced the medication error rate by 78%.

Mission: To restore health, rebuild life and revitalize hope for persons with a life-changing illness, injury or disability.

Vision: To be the recognized leader and valued partner in the application of world-class neuroscience and rehabilitation.

2015/2016 objectives

Improve Patient Outcomes

- Optimize patient recovery and participation
- Transform outpatient model of care

Improve Patient Safety

- Reduce falls and repeat falls
- Reduce medication errors

Improve Patient & Staff Experience

- On-time and successful ORCHID Electronic Health Record implementation
- Improve nursing communication with patients

Marketing & Business Development

- Increase admissions from DHS and community hospitals


GENUINE PART
CHEVROLET
DETROIT, MI
U.S.A.

Program and Administrative Units



Audit & Compliance

The Audit and Compliance Division performs independent investigations, internal audits, oversight of contract monitoring and administrative and management studies to ensure that DHS operations conform to established standards. The Administrative Investigations Unit investigates activity by DHS workforce members, contractors and vendors that appear to violate applicable laws, rules, policies or the Code of Conduct. The Compliance Unit manages the DHS Compliance Program, develops Standards of Conduct, evaluates compliance risks, and conducts compliance audits and training. The DHS Privacy Office oversees the strategic development, planning, implementation and maintenance of system-wide privacy compliance programs, workforce member training and policies and procedures. The Administrative Audit Unit conducts operational/compliance audits and selects high risk, high exposure and/or high liability issues for review and conducts contractor related investigations and serves as the liaison for DHS related audits conducted by entities external to our department (i.e. Auditor controller, Civil Grand Jury). Health Authority Law Enforcement Task Force (HALT) is a multi-disciplinary task force that conducts criminal and administrative investigations to deter illegal activities that pose a risk to the public's health and safety.

administrative staff



Gregory C. Polk
Deputy Director
Administrative Operations



Tobi L. Moree
Chief
Audit & Compliance

Leslie L. Mondy
Compliance Manager

Andrew Ellson, Suellen Ramos & George Bustamante
Investigative Managers

Jennifer Papp, RD
DHS Privacy Officer

Loretta Range
Administrative Audit Manager

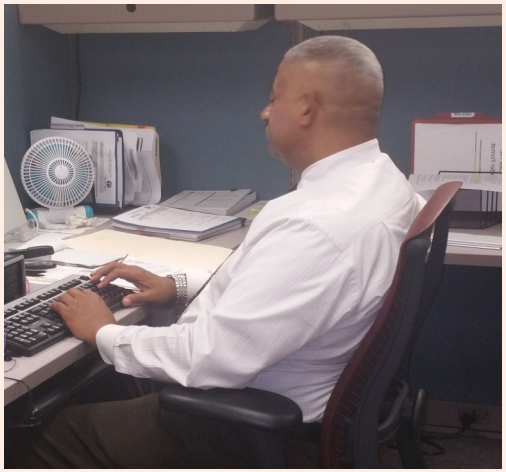


special projects & accomplishments

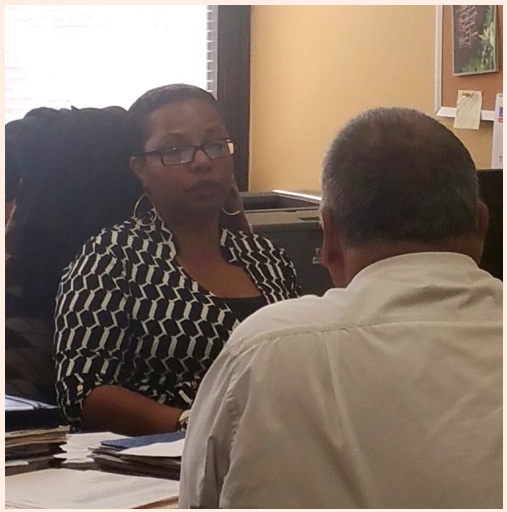
- Managed 138 complex and sensitive administrative investigations; completed and closed 126 of those cases. Provided management with corrective actions and recommendations to improve DHS operations and compliance with laws, DHS policy and other standards of conduct as a result of investigations and audits
- Developed a revised "Code of Conduct," in collaboration with the DHS Compliance Committee, which provides staff guidance regarding personal behaviors, professional expectations and includes an overview of significant policies with scenarios utilizing real world examples
- Coordinated the development and implementation of a new sanction screening process to assist the DHS in following best practices enhancing our capacity in preventing hiring and/or contracting with individuals or entities excluded by State or Federal actions. Trained 100+ staff including onboarding and credentialing staff which strengthened our screening capabilities
- Developed new "Compliance Awareness Training" and "Compliance Update Training" packages. These two trainings serve to educate and/or update new and existing workforce members on the Code of Conduct, the Compliance Program, behavior expectations and the reporting requirements when legal and/or policy violations are suspected

special projects & accomplishments (cont'd)

- Developed DHS Breach Notification policy and revised six HIPAA/privacy policies to ensure compliance with regulatory requirements
- Worked with the Online Real-time Centralized Health Information Database (ORCHID) team to ensure HIPAA regulatory requirements were met in the provision of Notice of Privacy Practices to DHS patients, ensuring documentation of physical receipt in the Electronic Medical Record
- Conducted audits/investigations of: DHS Standby Pay, Supply Chain Operations (annual physical supply inventories and Fixed/Capital Assets), Cashiering Operations, Controls over Patient Valuables, and Internal Services Department (ISD) Vehicle Service Charges for EMS vehicle repairs



- Our HALT team conducted 101 Investigations, made 63 arrests and closed 15 businesses associated with illegal activities. Worked with federal agencies investigating pill mills responsible for diverting large quantities of controlled substances. Investigated numerous cases involving the distribution of counterfeit drugs and confiscated over $3 million dollars in contraband pharmaceuticals
- HALT has been the recipient of numerous prestigious awards including:
    - Los Angeles County Quality and Productivity Commission Grand Award
    - Los Angeles County Quality and Productivity Commission Top Ten Award
    - Washington D.C. Weber Seavey Award for Law Enforcement Excellence
    - Washington D.C. Public Service Employees Roundtable Inter-Agency Award
    - National Association of Special Investigations Units Outstanding Public Service Award



2015/2016 objectives

- Publish and distribute revised DHS Code of Conduct
- Implement Compliance Awareness and Compliance Update Training
- Conduct Medical Necessity audits at DHS Hospitals on a schedule to be established by the Compliance Committee
- Validate that all DHS facilities have appropriately posted the revised Notice of Privacy Practices as required by HIPPA and Privacy regulations
- Conduct two focused privacy audits based on identified trends and/or high risk area and make recommendations for improvement that will support compliance with State and Federal privacy regulations
- Assess the anticipated County-wide HIPAA Privacy and Security Program objectives; work collaboratively with DHS IT Security office to tailor those objectives, as needed, to ensure regulatory compliance specific to DHS
- Streamline the review process for the annual audits and the monthly payroll reviews of Living Wage contractors
- Collaborate with numerous Local, State, and Federal agencies to deter illegal activities that pose a risk to the public's health and safety by conducting criminal and administrative investigations

Capital Projects



The Capital Projects Division is responsible for the development and oversight of the department's capital projects and improvement programs in support of our DHS facilities as an integrated health care delivery system. In-house architects, project managers and consultants provide initial planning, feasibility study reviews, schematic design, construction documents, cost estimating and management support services. The Division works closely with each facility to identify improvement needs, establish department capital project priorities, provide budgeting support as well as coordinate jurisdictional agency approvals, including Office of Statewide Health Planning and Development (OSHPD) and Building & Safety. We work closely with other supporting County departments and offices, such as Public Works, Internal Services, CEO, County Counsel and Board offices.



Rancho Los Amigos Consolidation Project (Architectural Rendering)

administrative staff



Gregory C. Polk
Deputy Director
Administrative Operations



John Shubin
Director
Capital Projects Division

special projects & accomplishments

- Completion of scoping documents and Board approval to award the design/build contract to construct the new Rancho Los Amigos Consolidation Project
- Completion of the Harbor-UCLA Medical Center Data Center Project
- Completion of the Long Beach Comprehensive Health Center Clinic Remodel Project
- Completion of the Martin Luther King Jr. Recuperative Care Remodel Project
- Completion of numerous Infrastructure improvements in support of the new ORCHID electronic health record system
- Completion of the Olive View-UCLA Psychiatric Emergency Room Expansion Project

2015/2016 objectives

- Completion of the new Rancho Los Amigos Wellness Center and Warehouse Projects and continued development of the new outpatient facility and Jaquelin Perry Institute (JPI) expansion
- Completion of various improvement projects to DHS' Health Center and Comprehensive Health Centers in support of primary care clinical services
- Completion of the Harbor-UCLA Psych ER Expansion Project
- Development and implementation of Master Plans at Harbor-UCLA, MLK Jr, OC, LAC+USC and OVMC-UCLA
- Completion of the San Fernando Valley Family Support Center
- Lab Automation Improvements County wide
- Completion of other critical projects, including "medical home" improvement projects, building infrastructure improvements, radiology equipment replacement projects, as well as other architectural enhancement and improvement projects


Rancho Los Amigos Consolidation Project (Interior Architectural Rendering)


Harbor-UCLA Campus



LAC+USC OPD 4th Floor Renovation



Rancho Los Amigos Consolidation Project (Architectural Rendering)

Centralized Contract Monitoring Division (CCMD)

new division, new priorities

CCMD conducts audits and oversight reviews regarding DHS' contracts to ensure consistency and uniformity in the contract monitoring process at DHS facilities and aids in improving contract performance through the corrective action process. In part we review:

- Personnel records of non-County workforce members
- Assess the quality of goods and services provided and compliance with contract requirements
- Ensure the receipt of timely contract deliverables
- Validate the accuracy and appropriateness of invoices submitted by County contractors

Additionally CCMD:

- Selects and conducts independent audits of very high risk and high risk contracts
- Strives to monitor annually 1,400 contracts used by DHS to ensure proper delivery of goods and services and the accuracy and timeliness of billing and payments
- Provides one-on-one training to enhance the expertise of Facility Contract Monitors (FCMs) and Liaisons (FCLs)



administrative staff



Gregory C. Polk
Deputy Director
Administrative Operations



Michael W. Clark
CIA & CFE
Division Chief

Judy Tan
Special Assignments

Manual Alderete
Supervisor, Fiscal Audits

Vera Hepker
Supervisor, Fiscal Audits

Elmer Alfaro
Supervisor, Program Audits

Jacqueline Jackson
Supervisor, Program Audits

Timothy Gilroy
Manager, Oversight & Special Audits

special projects & accomplishments

- Countywide consultations to identify specialized monitoring improvements
- Programmatic reviews to ensure service delivery and quality
- Fiscal reviews and living wage reviews to ensure appropriate utilization and reimbursement
- DHS status of contract monitoring report
- Risk assessment and quality review
- County wide training of FCMs and FCLs
- ISD contract report cards

2015/2016 objectives

risk reduction

- Increase contract compliance through a combination of auditing and monitoring
- Improving facility and program monitoring activities through continuous revision and simplification of monitoring tools

Care Transitions & Systems Integration

In order to succeed as a provider and system of choice for our patients, we need to be able to care coordinate and connect patients across the healthcare systems and help patients access the necessary community resources to thrive in the community setting.
The Office of Care Transition and System Integration is a new DHS division whose role is to develop the strategic and practical solutions necessary to address the health care challenges that our patients and providers face with care transitions to navigate and access resources.



administrative staff



Alexander Li, MD
Deputy Director

Socorro Rosales
Secretary

special projects & accomplishments

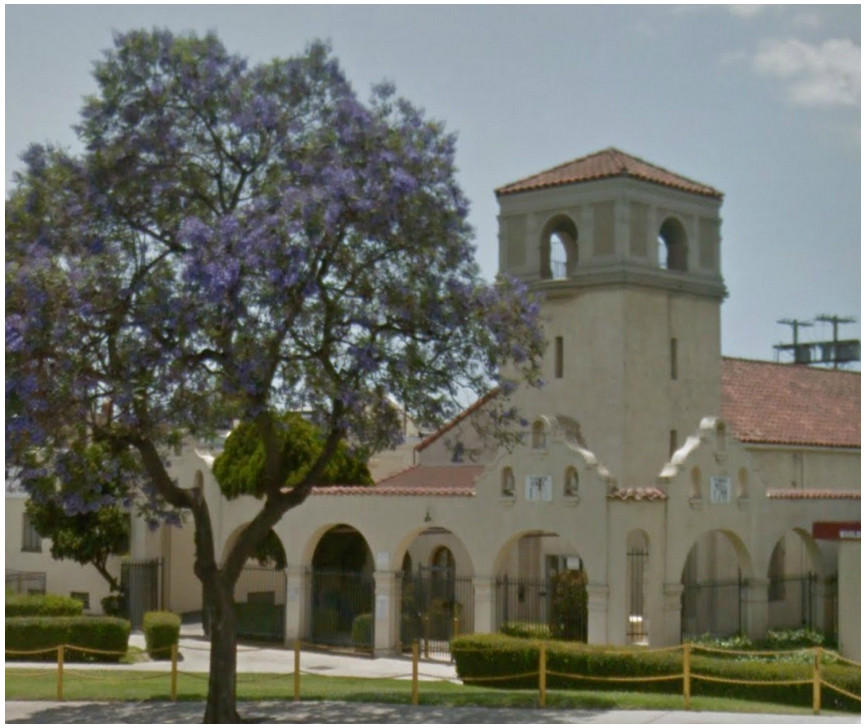
- Improve the care transition process for discharged patients from DHS hospitals to their patient-centered medical homes
- Improve linkages and access for patients with behavioral health needs
- Improve access to durable medical equipment, home health and hospice services

2015/2016 objectives

- Implement a care transition process for each DHS hospital inpatient and emergency room services for empaneled patients
- Work collaboratively with DMH to develop a comprehensive referral process for non-emergent behavioral health needs

College of Nursing and Allied Health (CONAH)

The Los Angeles County College of Nursing and Allied Health (CONAH) is a public community college that is owned and operated by the County of Los Angeles. Its divisions include the School of Nursing (SON), Education and Consulting Services (EDCOS), Allied Health, and student support services. The College supports the educational needs of Los Angeles County + University of Southern California (LAC+USC) Medical Center, LAC Department of Health Services (DHS) and LAC healthcare community by providing learning centered educational programs and career development opportunities for healthcare students.
The College is accredited by the Accrediting Commission of Community and Junior Colleges of the Western Association of Schools and Colleges (ACCJC: WASC) to offer an Associate of Science Degree in Nursing (ADN). The SON pre-licensure program is approved by the California Board of Registered Nursing (BRN). EDCOS is approved by the BRN to provide continuing education units.



administrative staff



Christina R. Ghaly, MD
Deputy Director
Strategy and Operations



Vivian Branchick, MS, RN
Director of Nursing Affairs
Chair, Board of Trustees



Barbara Collier, MEd, RN
Interim Provost, Dean
School of Nursing

Jeffrey Anderson, MSN, RN
Director, Educational Resource Center

Tammy Blass, EdD, RN
Dean, Education & Consulting Services

Maria Caballero, BSN, RN
Dean, Administrative & Student Services

Doris DeHart, BSN, RN
Administrator, Financial Aid, Clinical Affiliations

Herminia Honda, MSN, PNP, RN
Administrator, Acting Research Director

Peggy Nazarey, MSN, RN
Dean, Allied Health

special projects & accomplishments

- During the 2014-2015 academic year ninety-four (94) students completed the pre-licensure RN program. The College is very proud of its student achievement and its ability to provide a highly qualified pool of new nurses for DHS service. Nearly 100% of the graduates who took the national licensing exam (NCLEX-RN) passed on the first attempt. The average pass rate on the first attempt since 2010 to 2014 is 96%. The College's NCLEX- RN pass rate remains higher than the state and national averages and exemplifies the success of the college in educating future nurses in accordance with our motto, "There is no education like it in the world"

- In the past year, EDCOS offered over 400 classes and courses to over 6800 workforce members to meet the college mission. EDCOS coordinated the LAC+USC competency validation for over 3,000 nursing staff and the annual skills validation for over 2,400 nursing staff. EDCOS, as part of the post-licensure instructional team was responsible for providing theory and clinical instruction for over 100 new DHS RNs to function safely in high risk specialty areas of critical care and emergency medicine. The EDCOS dean and faculty continued to be active members of the DHS system-wide competency



special projects & accomplishments (cont'd)

- The College opened a Simulation Laboratory in support of DHS nurses and student learning needs utilizing updated simulation manikin
- Participated in ADN-BSN Collaborative project with Cal State LA (CSULA) with six students enrolled
- Participated in planning and implementation of ORCHID electronic health record for the LAC+USC staff
- Acquired Nursing Resource Center and e-book databases for student learning and clinical preparation and to support LAC+USC staff learning needs



2015/2016 objectives

- Utilize comprehensive Academic Management System for campus operations and to enhance student records management
- Incorporate ORCHID electronic health record into the curriculum to support student learning

Contracts & Grants

The Contracts and Grants Division (C&G) develops, implements and administers contracts and grants in a fair, efficient, responsive, accurate and ethical manner. C&G plays a fundamental role in DHS' internal operations, by being responsive to our internal clients and supporting the Department's mission to provide high-quality, patient-centered and cost effective health care through sound contracting efforts.

In FY 2014-15...

- DHS obtained approval of 66 Board Letters, including 40 related to contract actions; 8 for grant/donation acceptances
- C&G executed over 260 Board-approved service contracts and over 325 amendments to existing contracts
- C&G monitored contractors' compliance with insurance requirements for more than 1,300 active contracts to mitigate DHS' risk exposure

administrative staff



Gregory C. Polk
Deputy Director
Administrative Operations



Kathy K. Hanks, C.P.M.
Director

Julio Alvarado
Section Manager

Soo Kim
Section Manager

Enrique Sandoval
Section Manager



special projects & accomplishments

My Health LA(MHLA): Executed 53 new agreements with Community Partner (CP) clinics for the new MHLA program (budgeted at $61 million for FY 2014-15), based on a Request for Statement of Qualifications (RFSQ) issued in April 2014; processed 123 amendments

Healthy Way LA (HWLA): Amended 56 agreements to add dental services, relocate service sites and administrative offices and reallocate unspent funds

Dental Services: Extended Prop A dental services contract for 5 comprehensive health centers for $1.8 million

Temporary Medical and Nursing Personnel Services: Executed 26 successor agreements for use by DHS, DPH and Sheriff's Department Physician and Nursing Medical Services: Managed 434 Specialty Medical Services agreements and 3 Physician Registry agreements; executed 99 new agreements and 300 amendments to extend services through FY 2015-16

Inmate Care: Executed amendment to continue on-site urgent/specialty care for inmates at certain Sheriff facilities to increase the number of inmates receiving timely urgent and specialty care, and reduce the number of inmates requiring transfer to LAC+USC Medical Center

Home Health and Hospice: Executed 22 new agreements with firms to provide Home Health and Hospice services at a cost of $2.15 million based on an RFSQ

Pharmacy Services Administrator: Released a Request for Proposals (RFP) in October 2014 to manage MHLA clinics' 340B pharmacy networks and provide MHLA enrollees with access to a 24/7 pharmacy network

IT Systems: Developed and released Managed Care Core System RFP in November 2014 to replace legacy Patient Management System (PMS); completed evaluation process in April 2015

ORCHID-related: Managed agreements impacted by ORCHID implementation, including negations of 11 amendments and 6 termination notices to reduce ongoing maintenance costs resulting from ORCHID go-live

ITSSMA: Executed 7 new work orders worth $1.2 million and 13 work order amendments

Equipment Maintenance: Managed 40 agreements including 1 new Board-approved agreement and 5 Board-approved amendments involving over $5 million in funds; processed 32 administrative amendments to add/remove equipment

Supportive Housing: Developed 4 work orders to provide intensive case management and permanent supporting housing for homeless DHS patients. Released a solicitation in April 2015 to provide recuperative care services at the Martin Luther King, Jr. medical campus

Trauma Center: Released a solicitation to establish a new Level II Trauma Center in East San Gabriel Valley at Pomona Valley Medical Center. Completed negotiations with highest ranked applicant

EMS: Amended 77 Hospital Preparedness Participation agreements to expand scopes of work

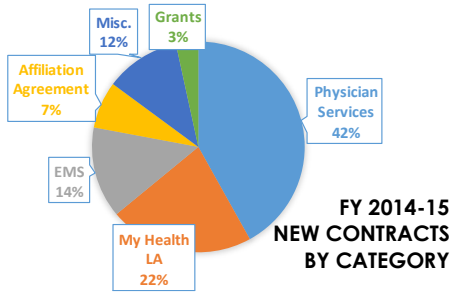
Housekeeping: Executed 6 Board-approved amendments to add staff and locations at various facilities and 6 delegated authority amendments to increase staffing

Finance & Revenue Management: Extended terms for 3 Board-approved agreements for the continued support of DHS and DPH with revenue management programs, an estimated $891 million of patient care revenue collections

Medical School Affiliation: Executed amendments to extend/add services with UC Regents (UCLA) for $663,000 and USC for $1.15 million

Training Affiliations: Managed 100 agreements with universities and vocational schools to provide hands-on training to health professionals

Grants: Accepted 3 grant awards worth $570,000 to support specialty care transformation, collaborative substance abuse care and MHLA enrollment/retention projects. Executed agreement with USC to conduct medical research/ education projects at LAC+USC Medical Center.



FY 2014-15 NEW CONTRACTS BY CATEGORY

2015/2016 objectives

- Continue to streamline departmental acquisition processes and develop creative acquisition alternatives, while complying with County contracting requirements
- Continue to promote and support a culture of professionalism, high standards of conduct, organizational responsibility and commitment to maintaining the public trust
- Develop and conduct solicitations, including but not limited to: Laundry, Landscape, Financial Services, Child Care Centers, Medical Record Coding
- Analyze Agreements to enforce contractor compliance with County insurance requirements

major functions

- Acquisition Consulting
- Acquisition Processes
- Contract Development and Negotiations
- Board Letters and Memos (including Acceptance of Donations and Grants)
- Contract Repository







Diversity & Cultural Competency

The Office of Diversity and Cultural Competency (ODCC) was established per motion by the BOS to provide oversight of DHS' Cultural & Linguistic Competency Standards of Practice. The mission of the Office is to ensure DHS-wide compliance with the mandated requirements of Title VI-Civil Rights Act and Federal regulations, State policies, as well as accreditation requirements of all regulatory oversight entities, guaranteeing effective language access and healthcare interpreter service infrastructure throughout all DHS facilities.

major accomplishments

- Collaborated with a number of DHS-wide ORCHID teams to ensure that all language access requirements and race and ethnicity data capture mandates are met. Coordinated the translation of the "Patient Portal" site into Spanish
- Responded to a request from the Federal Office for Civil Rights to assist with planning and coordination of a presentation during the "National AIDS Conference" that was held in October. This request entailed the identification of presenters from DHS and/or DPH who would be able to showcase their "Best Practice Models of Intervention" regarding the following subject area: *"Models of Culturally and Linguistically Appropriate Services Relating to the National HIV/AIDS Strategy to Improve Outcomes"*
- Per request of the ACN, spear-headed the coordination of translating the *"Notice of Privacy Practices"* and the *"General Consent"* forms in a total of 10 threshold languages, all of which will be available on ORCHID

administrative staff



Christina R. Ghaly, MD
Deputy Director
Strategy and Operations



Vivian Branchick, MS, RN
Director
Nursing Affairs



Nina Vassilian, MPH, MCHS
Acting Director

CULTURAL & LINGUISTIC COMPETENCY plays a key role in DHS' system transformation in our efforts to remain as the Provider-of-Choice in the era of Health Care Reform.
Studies have shown that when medical providers are unable to communicate with limited-English speaking patients in their own language, the patients: (1) are less likely to receive appropriate care; (2) are less likely to understand care instructions; (3) have increased risk of medical errors; (4) have reduced quality of care; (5) have increased risk of unethical care; and, (6) are less satisfied with their care.
CULTURAL & LINGUISTIC COMPETENCY results in improved outcomes in delivery of healthcare services for DHS patients who represent a wide range of language, ethnicity and cultural backgrounds. Improved patient care outcomes are identified by the following key elements:

- Improved quality in the delivery of care
- Improved patient safety compliance
- Improved patient adherence with the medical regimen
- Improved patient experience & customer satisfaction
- Ensure Risk Management and Liability Prevention against Class Action Lawsuits, Compliance with Federal Laws and State Regulations and Mandatory Accreditation Requirements.

What a "Healthcare Interpreter" does -- by Jenny L. Veliz-Urzua, MSN, APRN of Harbor-UCLA Medical Center

The language interpretation services via Healthcare Interpreter staff, the VMI, and the Telephonic Interpretation service have been vital components in delivering care to patients at Harbor-UCLA Medical Center. As the Co-Chair for the Cancer Education Outreach Task Force and the Surgical Oncology Nurse Practitioner, I can personally state that the language interpretation services play a key role in our healthcare delivery team. We have incorporated these services on a daily basis when discussing the pre- or post-operative surgical care, giving a patient the diagnosis of cancer and assuring there is true understanding on the patient's behalf. Not only does this help us meet the legal obligations of our standard of care, it allows us to incorporate the patient's level of understanding to champion over their own healthcare decisions, by practicing good ethics. For example, I was evaluating a Cambodian speaking female that brought her cousin as the interpreter. They did not want to use the VMI and wanted me to quickly start the visit. As soon as I started the VMI, the visit went smoothly, and we discussed at length the patient's own concerns without dialogue from her cousin. In a follow up visit with the patient, she came by herself, trusting that I would communicate with her in the same manner. Once we concluded our second visit, she verbalized via the VMI interpreter how grateful she was for my dedication in communicating effectively with her and she began to cry because she felt appreciative of me being relentless in my quest for her to understand her diagnosis.

special projects

Life Long Healthy Choices Program Celebrates One-year Anniversary — A Unique Culturally Competent Program at H. H. Humphrey CHC by Princess Obienu, MPH

Hubert H. Humphrey Comprehensive Health Center (HHHCHC) has been fulfilling its moral and legal obligations in eliminating language and cultural barriers, by helping to increase understanding and improving access to healthcare services for its diverse LEP service community.
The Life Long Healthy Choices (LLHC) program, funded through a Keck-USC Community Grant, is a nutrition & physical activity program for children with obesity and their families. We celebrated its one year anniversary in February 2015! The health education team has been challenging everyone to eat healthier, be more physically active, lead a healthier quality life, as well as reach out to the community to inform others about the LLHC program. Access to the LLHC program is free and easy and referrals are highly encouraged . Children and their families from diverse ethnic groups are serviced and empowered to lead healthier and quality lives; from 5 A-Day-fruits and vegetables consumption, to sugar-savvy food label reading, calorie counting, portion sizes, water intake, well-balanced meals, staying active and more! Prevention matters to us and we all want our children to succeed in all aspects of their lives. Our motto is: Healthy Children, Healthy Adults, Healthy Community and Wealthy Community!

Care Harbor Free Clinic — Sponsored by the Second Supervisorial District

Coordinated the DHS-wide Medical/Healthcare Interpreter staffing coverage for Care Harbor Free Clinic which was endorsed by Supervisor Mark Ridley-Thomas' office. A total of 9 Medical/Healthcare Interpreter staff participated on behalf of DHS to assist clinicians and medical personnel. The staff was all trained, tested and qualified fulltime Medical/Healthcare Interpreters who were assigned to areas involving complex medical encounters. The covered languages were Spanish and Korean. Care Harbor Free Clinic was held on September 11 through September 14, 2014, at the L.A. Sports Arena.

Cultural Awareness Observances — Diversity Operations Council-sponsored Events

Rancho Los Amigos' Language and Culture Resource Center provided a bi-annual training to staff, entitled "*Introduction to Interpreting Ethics and Roles in Healthcare*".
The Rancho Los Amigos' Cultural Diversity Operations Council coordinates annual events for staff and patients/families that features various cultural performances, vendors, displays, information booths and cultural treatments such as Acupuncture. These festivities were held in honor of the following: "Black History Month", "Asian Pacific Islander Heritage Month", "Hispanic Heritage Month", "Native American Heritage Month" and "Holidays Around the World".

What a "Healthcare Interpreter" does -- From a Healthcare Interpreter's Own Words by Wing Suen of Rancho Los Amigos

"As a Mandarin/Cantonese healthcare interpreter, I see myself as a link between the patient and the healthcare provider in the hospital. Once a patient with diabetes called me complaining about symptoms related to abnormal blood sugar levels. He suspected that his medications needed some adjustments. I contacted his primary care provider, who then adjusted his medications on the phone and made an appointment to see him in a few days.
A benefit of the interpreter is that he/she can have a holistic picture of the patient whom he/she has been helping. The interpreter often follows the same patient across different departments in the hospital and also across different stages of the patient's recovery for a period of time and therefore, has a holistic understanding of the patient. This understanding helps the interpreter to do a better job in interpretation and in alerting the clinicians or the patient of changes or specific needs in the patient's recovery.
Another benefit of the interpreter is to promote understanding between the people from other nations (Chinese, in my case) and the American culture. Many people know that the Chinese have close family ties and they respect the elderly, but they also educate their children to call even a stranger whom they first meet "uncle" or "aunt". This reflects what Mencius, a great philosopher after Confucius, has said, "Honor old people as we do our aged parents and care for other's children as one's own." To the patients, I have been helping them navigate this complex web of healthcare system, which is part of the American culture. They have learned, for instance, that they do not need to talk with the doctor directly for all their needs, because there are different departments that deal with specific needs of the patients."

What a "Healthcare Interpreter" does -- From a Clinicians' own words by Kelly Fernandez of Rancho Los Amigos

The following comment is from a foreign nurse who recently moved to the States and works at Rancho Los Amigos: "I've come from a country where there are two officially spoken languages, but I only speak one of them. On several occasions, we had patients who spoke the language I don't master, so we relied on family members over the phone to help us interpreter. I wish there was something similar to VMI where I come from. Now that I have come to the States and work at Rancho Los Amigos, I can tell how important it is to use a highly qualified and professional interpreter, because it helps us provide better care for our patients".

Emergency Medical Services Agency

Mission: To ensure timely, compassionate and quality emergency and disaster medical services.

The Emergency Medical Services (EMS) Agency is responsible for the coordination, planning and regulation of the County-wide EMS System. In addition, physician reimbursement for indigent emergency care, ambulance licensing, the coordination of DHS patient transfers and transportation and healthcare disaster preparedness are all programs managed by the EMS Agency. Los Angeles County's regionalized systems of emergency care includes Trauma, Stroke, STEMI, Cardiac Arrest, Pediatric and Disaster care. These systems are nationally recognized and the program data is frequently presented in academic publications and at State and National conferences. We are proud of our accomplishments and successes, which are only possible through the hard work and dedication of EMS Agency staff and the support of the DHS and the Board of Supervisors.

In efforts to build more efficient delivery models for our patients, the EMS Agency continues to support EMS providers as they adopt the use of electronic patient care records (ePCR) in the field setting. To further expand the use of ePCR, the EMS Agency worked with the Board of Supervisors to award $2.4 million in funding to select providers through a Request for Application (RFA) process with the overall goal of enhancing both data accuracy and health information exchange.

This year the EMS Agency approved two new licensed basic emergency departments (EDs), St. Vincent Medical Center and Martin Luther King, Jr. Community Hospital to receive patients from the 9-1-1 system. These hospitals have increased the overall ED capacity in the County by 29 treatment bays. Additionally, Pomona Valley Hospital Medical Center was the most qualified respondent to a RFA to become the designated Trauma Center in the east San Gabriel Valley.

The Community Paramedicine pilot projects, developed last year, were approved by the Office of Statewide Health Planning and Development. Training of paramedics participating in two pilot projects, which include assisting hospitals in reducing readmissions and reducing the burden on our overcrowded emergency departments by using alternative care sites, began and the programs were launched in August 2015.

We look forward to 2015-16 and the continual changes and enhancements to the EMS System and our programs. Undoubtedly, the year will bring welcome changes and challenges to our dynamic EMS System.

AHA Mission Lifeline® Awards LA County with Gold Level Recognition Award

The American Heart Association recently recognized the EMS Agency with the EMS Gold Level Recognition Award, for achievements in ST–elevation myocardial infarction (STEMI) care. This program recognizes the collaboration among pre-hospital and hospital providers in rapidly identifying a patient with a STEMI, promptly notifying the STEMI Receiving Center and triggering an early response from the awaiting hospital personnel. During the past two years, Los Angles County's EMS system met the below criteria 75% of the time or better:

- Percentage of patients with non-traumatic chest pain $\geq$ 35 years of age, treated and transported by EMS who receives a pre-hospital 12 Lead electrocardiogram (ECG).
- Percentage of STEMI patients transported to a STEMI Receiving Center, with pre-hospital First Medical Contact (FMC) to Device (PCI) $\leq$ 90 Minutes.
- Percentage of STEMI patients transported to a STEMI Referring Center with Arrival (to Referring Center) to Fibrinolytic Therapy administration in $\leq$30 Minutes.

Ebola Preparedness and Response Activities

The Ebola outbreak in West Africa created another busy year for the EMS Agency. To address the concerns should a resident or visitor in LA County become ill with the Ebola virus, the EMS Agency:

- Represented DHS in the County Ebola Task Force to develop Ebola response plans.
- Developed triage, patient care, and transportation guidelines for 9-1-1 and private ambulance providers.
- Worked with private ambulance companies to identify "high-risk" ambulance vehicles prepped to transport highly infectious patients.
- Engaged with private hospital partners to establish two CDC-designated Ebola Treatment Hospitals and two Ebola Assessment Centers.

The EMS Agency continues to work with County departments and healthcare facilities to prepare the County's medical and health system for emerging infection diseases.

administrative staff



Christina R. Ghaly, MD
Deputy Director
Strategy and Operations



Cathy Chidester
Director



William Koenig, MD
Medical Director



Roel Amara
Assistant Director



Kay Fruhwirth
Assistant Director



Richard Tadeo
Assistant Director

Bill Koenig, MD, Medical Director Retires from County Service



On May 28, 2015, Bill Koenig, MD retired from County Service as the Medical Director for the EMS Agency. During the past ten years the EMS system benefited from his leadership and vision. Key accomplishments include:

- Development and implementation of regionalized systems of care for STEMI , Stroke and Cardiac Arrest patients. Together, these systems treat over 15,000 patients annually
- Emphasized an evidence based approach to system expansion, encouraging the use of electronic prehospital medical records
- Utilizing our nationally recognized EMS Agency database, worked with our academic partners to publish manuscripts and abstracts for presentations at national conferences. During his directorship, in conjunction with UCLA, the system participated in the largest randomized, prehospital stroke trial ever completed
- In conjunction with Harbor-UCLA Medical Center, initiated one of the earliest accredited EMS Fellowships in the nation; teaching EMS to emergency medicine trained residents. This has now become the newest Board Certified Emergency Medicine sub-specialty
- Expanded LA County paramedic scope of practice to include 12-Lead EKG, Intraosseous Access, Transcutaneous Pacing, CPAP, $ETCO_2$ monitoring, and hemorrhage control

Dr. Koenig leaves us with this reflection:

> "It is so rewarding to have been able to participate in the advancement of systems of care in Los Angeles County- Cardiac arrest, STEMI, Stroke, Trauma, and Pediatric. Our EMS Agency and the EMS Medical community worked diligently to excel. And we have! National benchmarks are consistently achieved or bettered – every life that has been saved is a tribute to our caregiver's tireless efforts."



Ambulance Services Celebrates 125 Years of Continuous Service

February 2015 marked 125 years of continuous operations of the County's Ambulance Service. From the first horse-drawn carriage to today's modern fleet of ambulances, this service has played an essential role in ensuring the safe transport of patients in the County's care. Today's sophisticated ambulance operations are coordinated by the Central Dispatch Office, which handles about 3,000 calls a month with a 24/7/365 operation. The ambulances are staffed by Emergency Medical Technicians (EMTs) who can provide basic life support and first aid care. Ambulance Services is an important public service that operates behind the scenes and helps the department meet its mission.

The Board of Supervisors acknowledged the contribution and longevity of Ambulance Services with a presentation at the February 3, 2015 Board meeting.



accomplishments

- Coordinated the training of over 10,000 people on June 4, 2015 in Hands-Only CPR
- Expanded the number of available emergency department treatment bays and 9-1-1 Receiving Centers with the opening of St. Vincent Medical Center as a Basic Emergency Department
- Participated in coordinating the transport of ill and injured patrons attending ten different mass gathering events to include the Long Beach Marathon, Los Angeles Marathon, Tournament of Roses events, West Hollywood Pride Parade and music festivals
- Increased the number of EMS Public Provider Agencies using electronic patient care records, with 70% having implemented an ePCR system and 16% in the process of procuring a system
- Convened 9-1-1 Medical Dispatch Centers (MDCs) improving collaboration and communication between the 11 MDCs and the EMS Agency

Enterprise Health Information Management (EHIM)

administrative staff



Anish Mahajan, MD
Director
System Planning
Improvement & Data Analytics



Harvey Jones, Jr., MA, RHIA
Director
Enterprise Health Information Management

What is Enterprise Health Information Management (EHIM)? What is HIM?

Enterprise Health Information Management (EHIM) is the executive leadership for the Department of Health Services' (DHS) Health information Management Departments.

The Health Information Management (HIM) division at DHS provides the following services:

- Inpatient and Outpatient Coding: Using ICD-9/ICD-10 CPT-4, ICD-O and HCPCS coding classifications to translate clinical documentation into the appropriate code. Diagnostic and procedural codes are used by DHS for billing, state reporting and statistical reporting.
- Release of Information: Evaluating, processing and tracking requests for protected health information from patients, government agencies, other medical institutions, and/or legal requests (i.e. subpoenas, court appearances, disability claims, insurance claims, search warrants, etc.)
- Enterprise Master Patient Index (EMPI): Manage a database of unique identifiers assigned to each individual patient to ensure that a patient's medical records are consistent, accurate, current and complete across DHS clinical and administrative units and divisions.
- Tumor Registry: Reviewing, abstracting, and coding clinical cancer information in order to comply with government regulations.

EHIM and each local HIM department's goal is to provide correct and dependable data to the various clinical, operational and administrative units/divisions across DHS. HIM professionals in DHS work to provide quality patient information while migrating to the highest standards of data integrity, confidentiality and security.

EHIM also supports ORCHID implementation in various DHS facilities by serving as Subject Matter Experts (SMEs) on medical coding, ICD-9*, ICD-10*, CPT-4*, HCPCS* and HIPAA* and regulatory standards.

- (ICD-9) International Classification of Diseases, Version 9
- (ICD-10) International Classification of Diseases, Version 10
- (CPT-4) Current Procedural Terminology, Version 4
- (HCPCS) Healthcare Common Procedure Coding System
- (HIPAA) Health Insurance Portability and Accountability Act



2015/2016 objectives

- Continue ICD-10 training for DHS coders and physicians
- Assist with the ICD-10 go live on October 1, 2015
- Complete coding of inpatient records within 10 days of discharge
- Partner with DHS Finance and DHS physicians to create a Revenue Cycle Committee
- Streamline the outpatient coding process throughout DHS
- Perform coding audits of inpatient and outpatient records to address and foster data quality
- Integrate the IBM and LANES systems into the DHS patient record merging process
- Migrate all HIM Departments from a paper based operation to a digital operation

achievements & current projects

- Provide online ICD-10 training for DHS coders
- Provide online ICD-10 training DHS physicians
- Assist with ORCHID implementation of HIM systems at ORCHID live sites
- Continue partnership with SEIU Local 721, HIM management and DHS Employee Relations to provide a forum to discuss issues affecting DHS HIM staff
- Transition patient records merging process from Affinity and Quantim to ORCHID
- Transition paper medical records stored within DHS facilities to off-site locations
- Assist DHS coders to obtain American Health Information Management Association (AHIMA) coding credentials by providing classes and training
- Continue partnership with DHS Class Compensation to provide DHS HIM staff with a career adder

EHIM lead staff

Brenda Booth-West
- EHIM Human Resources Manager

Karyn Ellis
- Contracts/Budget/Data

Christopher Jay Rodriguez
- Coding Quality & Compliance Manager

Sylvia Lumford
- EMPI Administrative & Technical Lead

Patricia Solorio & Versellia Biggers
- Administrative Support

Facilities Management

The Facilities Management Division (FMD) is responsible for building operations at the Health Services Administration (HSA) headquarters, administrative offices in Commerce, and management of the following:

Antelope Valley Health Center	335-B E Avenue K-6, Lancaster
Dollarhide Health Center	1108 N Oleander Street, Compton
EMS Administrative Headquarters	10100 Pioneer Boulevard, Santa Fe Springs
EMS Disaster Staging Warehouse	10430 Slusher Drive, Santa Fe Springs
Family Health Center	1403 Lomita Boulevard, Harbor City
Hawaiian Gardens Health Center	22310 Wardham Avenue, Hawaiian Gardens
LAC+USC Medical Center Records Warehouse	2011 N Soto Street, Los Angeles
Lake Los Angeles Community Clinic	8201 Pearblossom Highway, Littlerock
Leavey Center	512-522 S San Pedro Street, Los Angeles
Office of Managed Care	1100 Corporate Place, Monterey Park
OMC Administrative Headquarters	1000 S Fremont Avenue, Alhambra
South Valley Medical Center	38350 40th Street, East Palmdale

Additional major responsibilities include:

- Representing DHS on the Board-approved Countywide Waste Management Group for a Sustainable Future
- Administration of the parking operations at Figueroa (with ISD) and Ferguson/Commerce buildings
- Daily management of facilities issues including custodial service, repairs, security, mail operations, deliveries and building systems
- Management of office space allocations and related strategic planning
- Co-management of on-site cafeteria and vending services for employees and the public
- Representing DHS on the Board-approved Countywide Water Conservation Working Group

special projects & accomplishments

During Fiscal Year (FY) 2014-2015, FMD completed several new projects to maximize space utilization at headquarters in efficient and cost-effective ways. Projects included:

- Continued renovation of the 12th floor utilizing in-house cost-effective resources
- Cost effective upgrades to the exterior of the Ferguson Complex
- Resurfacing the Ferguson parking lot
- Building renovation on the LAC+USC campus to house ORCHID Program employees
- Implementing environmental initiative to decrease the electricity consumption at HSA and Ferguson Complex
- Expansion of Electric Vehicle Charging stations throughout the system
- Replaced carpet on 4th floor at HSA

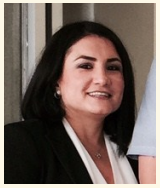
administrative staff



Gerardo Pinedo
Director



Marta Garcia-Sheffield
Chief
Facilities Planning



Lusine Muradyan
Building Manager
Ferguson Complex



Cecilia Galdones
Planner I

Glenda Johnson
Office Manager

Andre Harper
Senior Custodian Supervisor

Algenoid Banks
Warehouse Worker
HSA Relocation Coordinator

Tony Hardwell
Senior Clerk
Executive Messenger

Sandra Long
Intermediate Typist Clerk
Mail Room Clerk

2015/2016 objectives

Projects scheduled for completion

- Implementation of a new Building Emergency Plan to meet LA City Fire Codes for High-Rise buildings in the City of Los Angeles. This will include the creation of new Building Emergency Manual, training of the Building Fire Director, training the building's Floor Wardens and Alternate Floor Wardens and all the tenants and conducting at least one fire drill for the entire building, under the supervision of the LA City Fire Department Inspector
- Creating and implementing the Chief Administrative Office (CEO) new Continuity of Operations Plan (COOP) for HSA
- Continue assessing departmental space needs and assisting with acquisition of new lease space and renewal of existing leases
- Continue assessing HSA building's systems and equipment to determine operational status, longevity, depreciation, obsolesce and replacement cost
- Continue assisting the Department's Employee Transportations Coordinators to meet South Coast Air Quality Management District (SCAQMD) ridesharing goals for multiple locations throughout the County









Government Affairs & Communications



Our mission is to be responsive to our governing body, the L.A. County Board of Supervisors, and to our elected officials in the state Legislature and the U.S. Congress, to ensure that they receive timely information and support as they advocate on behalf of the County's health safety net. We provide testimony at hearings, staff booths at health fairs and we investigate constituent case referrals from our elected officials. We are also happy to fill our department's communication needs by responding to media organizations and members of the public who seek information about our programs and services; and we are especially proud to be able to support our County commissions as they explore ways to help us improve care and services for patients. Our goal is to provide the best customer service possible in an expeditious manner to all people at all times.

administrative staff



Gerardo Pinedo
Director



Rowena Magaña
Assistant Director
Board Relations &
Legislative Affairs



Michael Wilson
Manager
Public Affairs

Lisa Finkelstein
Staff Analyst
DHS Workplace Programs Coordinator
Casework Coordinator

TaNeisha Franklin-Farthing
Staff Analyst

Connie Salgado-Sanchez
Legislative Analyst

Brigitte Santana
Legislative Analyst

Robin T. Young
Public Information Assistant

Regina Jemmott
Senior Clerk

Hasmik Dirmandzhyan
Secretary

Karl Pascasio
Student Worker

Jasmin Quintanilla
Career Development Intern

Board Relations

- Processed all Board letters for 3 Departments including Health, Public Health and Mental Health, working in concert with County CEO, for the Health and Mental Health Services Cluster weekly briefings to ensure compliance with legal requirements when briefing policy and budget deputies from the L.A. County Board of Supervisors
- Successfully resolved hundreds of constituent case referrals and inquiries from Board offices
- Coordinated reports to the Board as required by County CEO and Board motions

Legislative Affairs

- Responded to inquiries from Congressional, Senate, Assembly, and City elected officials seeking policy proposals, data, general information and assistance for their constituents
- Represented the Department of Health Services at legislative hearings, community forums, and health fairs sponsored by elected officials from local, state, and federal levels of government
- Worked closely with County CEO advocates and analysts to help in the development of legislative proposals and to review all relevant state and federal legislation impacting health

Communications & Public Affairs

- Handled interview and information requests from print and broadcast journalists/media outlets on myriad health, operational and policy issues
- Coordinated high visibility press events to highlight departmental news, capital projects and initiatives, including Sidewalk CPR and influenza vaccination campaigns
- Handled public records requests as part of County's commitment to open and transparent government
- Produced print and digital communications highlighting DHS facilities, services, providers and programs
- Implemented enhancements to DHS web/mobile sites for improved user experience

Commission Support

- Supported Hospitals and Health Care Delivery Systems Commission by preparing/posting agendas, coordinating site visits, minutes and providing administrative support
- Served as Department-wide Productivity Manager and liaison to the Quality and Productivity Commission; administered Productivity Investment Funds and coordinate awards entries



Housing for Health

HOUSING FOR HEALTH

Housing for Health (HFH) works to end homelessness in Los Angeles County, reduce inappropriate use of expensive health care resources, and improve health outcomes for vulnerable populations. This is accomplished by providing permanent supportive housing, interim housing (recuperative care and stabilization housing) and specialized primary care to homeless people with complex physical and behavioral health conditions.
Permanent supportive housing, the cornerstone of HFH's approach, includes decent, safe and affordable housing linked to a flexible array of support services. These on-site or roving supportive services along with access to medical and behavioral health care are integral to achieving housing stability, improved health status and greater levels of independence and economic security.



The New Pershing, located in downtown, opened in April 2015 after a major rehab. The new design maintained the historic façade and staircase. 65 units total with 47 units set aside for HFH referrals. Developed and owned by Skid Row Housing Trust. Building has large courtyard on ground floor to promote community building.

administrative staff



Mark Ghaly, MD
Deputy Director
Community Health



Marc Trotz
Director

a former caregiver now finds the support she needs

On July 1, 2015, Housing for Health launched Breaking Barriers, a collaboration with the LA County Probation Department to provide a rapid-rehousing program through the Flexible Housing Subsidy Pool (FHSP). The FHSP is a supportive housing rental subsidy program designed to secure quality affordable housing for people experiencing homelessness. Breaking Barriers connects probationers who are homeless to housing, case management, and employment services, with the goal of ending homelessness and reducing recidivism.

Brilliant Corners, the agency which operates the FHSP, is charged with finding units and making rental subsidy payments. As program participants increase their income, their contribution towards rent increases and over a two year period the rental subsidy ends so that participants take over the rent and transition in place. Brilliant Corners also provides intensive case management services, which include providing assistance in the housing process, securing educational and employment opportunities and establishing connections to health, mental health and substance abuse treatment services in the community. Specialized employment services are provided by Chrysalis.

This program, which is the first of its kind in the country, was launched with $4.2 million in funding for over two years from the Probation Department and the Conrad N. Hilton Foundation. The goal of the program is to serve 200-300 probationers over this period of time. An evaluation of the program willl be conducted by RAND.

creating a medical home for the homeless in skid row

In November 2014, DHS and HFH opened the Star Clinic, a primary care clinic that provides high-quality medical care to homeless and formerly homeless individuals. The Star Clinic specializes in serving patients with complex health and behavioral conditions. The five exam room clinic provides primary care, podiatry, wound care and behavioral health services. Many patients suffer high rates of disability and have several untreated health conditions, which can lead to early mortality without the medical intervention provided by the Star Clinic staff. In providing consistent and longitudinal primary care services tailored to the needs of chronically homeless individuals in Skid Row, the Star Clinic helps HFH reach two of its primary goals: improving the health and well-being of vulnerable populations and overtime reducing the overuse of expensive hospital based resources.

The Star Clinic is located in the Skid Row neighborhood on the ground floor of the Star Apartments, a 100-unit supportive housing site that houses HFH patients and is run by the Skid Row Housing Trust. This clinic space allows staff to provide direct health care services to the DHS patients being housed through HFH right above them. The Star's position in Skid Row also allows for services to be extended to the greater Skid Row community and provides access to care for a population that has been historically difficult to engage in traditional healthcare settings. HFH aims to connect every client to a home – not only in the form of permanent supportive housing, but also through the establishment of a medical home.



2015/2016 objectives

- More than double the capacity to provide permanent supportive housing and interim housing for DHS patients with complex physical and behavioral health conditions
- The HFH Access and Referral Team continues to work with DHS hospital partners to identify homeless high-utilizers to prioritize for housing resources

outcomes to date:

- Increased outreach capacity in downtown Skid Row area
- Opened a new primary care clinic in Skid Row that specializes in integrated health care for homeless DHS patients
- Leased up three new project based housing sites
- Housed 894 patients as of June 30th with a housing retention rate of 92%

Permanent supportive housing (as of June 30, 2015)	
# new individuals placed in housing since Nov. 2012	894
# of patients currently housed	839
# units in housing portfolio	958
Recuperative Care	
# new individuals admitted FY 14-15	328

Human Resources

The Human Resources (HR) Division is dedicated to maintaining and fostering DHS' diverse work-force and its commitment to patient care. We strive to provide a positive work environment for the over 20,000 strong DHS staff through equitable and accessible administration of HR programs and policies.

The HR Division supports DHS' strategic goals by:

- Recruiting, engaging and developing a highly skilled, productive workforce
- Facilitating productive employee relations
- Ensuring compliance according to the HR standards set by Joint Commission on Accreditation of Healthcare Organization (JHACO)
- Supporting a discrimination-free workplace and just culture
- Streamlining and improving business processes
- Providing responsive and effective customer service

Central DHS HR Administration is located in Commerce. Additional on-site HR units are located within six L.A. County medical sites: Harbor-UCLA, LAC+USC, Olive View-UCLA, MLK Jr. OC, High Desert RHC and Rancho-Los Amigos. Central HR Administration provides services and support to DHS supervisors and employees via the following core areas:

- Classification and Compensation
- Employee Relations
- Payroll, Time Collection, FMLA and Benefits
- Performance Management
- Personnel Services
- Recruitment and Examinations
- Regulatory Compliance
- Training and Organizational Development

The on-site HR units serve as local contacts for HR issues at the DHS facilities and also provide on-boarding support for non-county workforce

special projects & accomplishments

- Supported the hospital-based Nurse Staffing Plan (NSP) through exam administration, one-stop job fairs and expedited on-boarding to achieve the Year 1 target of hiring over 800 healthcare workers, including RNs, nursing attendants and clerks
- Sought and implemented CEO approval of a manpower shortage rate to support the recruitment and retention of Primary Care Physicians
- Partnered with ORCHID to timely on-board IT staff and non-County workforce (trainers and elbow-to-elbow support) for implementation at Harbor-UCLA, MLK Jr. OC and LAC+USC
- Launched Partnership 101 training in collaboration with WERC and SEIU to transform the joint labor-management committees
- Rolled out Phase II of the County-wide electronic performance evaluation system, Performance Net, and provided over 100 training sessions to DHS supervisors and line staff
- Investigated and made determinations on more than 1,000 performance management cases
- Improved compliance on County Policy of Equity and Sexual Harassment Prevention Trainings to over 80% DHS-wide
- Implemented a new sanction-screening tool to identify workforce members and agencies excluded from participating in federally funded health care programs

administrative staff



Liz Jacobi
Director
Human Resources



Marilyn W. Hawkins
Assistant Director



Tim Pescatello
Assistant Director

Central Services Managers

Alice Aragonez: Personnel Services
Rayette Hernandez: Classification & Compensation
Donna Lough: Employee Relations
Laura Rinard: Payroll & Benefits
Sharon Robinson: Regulatory Compliance & Training
Heberto Sanchez: Recruitment & Examinations
Joi Williams: Performance Management

On-Site HR Managers

Thomas Beggane: Olive View-UCLA
Anna Carpena: Rancho Los Amigos NRC
George Kolle: High Desert RHC
Monique Ortega: LAC+USC
Regina Pierre: Martin Luther King, Jr. OC
Karyl Smith: Harbor-UCLA

special projects & accomplishments (cont'd)

- Participated in the first phase of NeoGov, the County's new recruitment and exam portal
- Completed the County mandate of expanded Live Scan review of non-represented employees for FBI background review, processing over 1,200 staff
- Successfully transitioned to the County's new Performance Management Tracking System (PMTS)





2015/2016 objectives

- Plan for Phase II of the NSP recruitment initiative and hire 370 additional healthcare workers
- Ensure all DHS-SEIU labor-management committees receive Partnership 101 training
- Provide HR support to transition DMH staff to OVMC -UCLA's Crisis Stabilization Program and plan for the transition of the Sheriff's Department Medical Services Bureau to DHS
- Finalize NeoGov roll-out for all 224 job classifications delegated to DHS HR for exam administration
- Implement a centralized identification system to streamline workforce management DHS-wide
- Support CEO negotiations with unions representing DHS employees for equitable successor Memorandum of Understandings
- Upgrade HR's intranet presence with self-service functions and manager tools
- Develop Performance Management reports to track trends by facility, classification and performance indicators
- Administer an employee engagement survey across all DHS facilities



Information Technology

DHS Information Technology (IT) leads IT innovations, initiatives, and services to support DHS' strategic goals.

- Goal: Transform DHS from an episodic, hospital focused system into an integrated, high quality delivery system
- Goal: Create a modern IT system that improves the care of our patients and assures efficient user of resources
- Goal: Foster a culture of empowered staff and community, organized labor and university partners constantly looking for opportunities to improve the services provided to patients

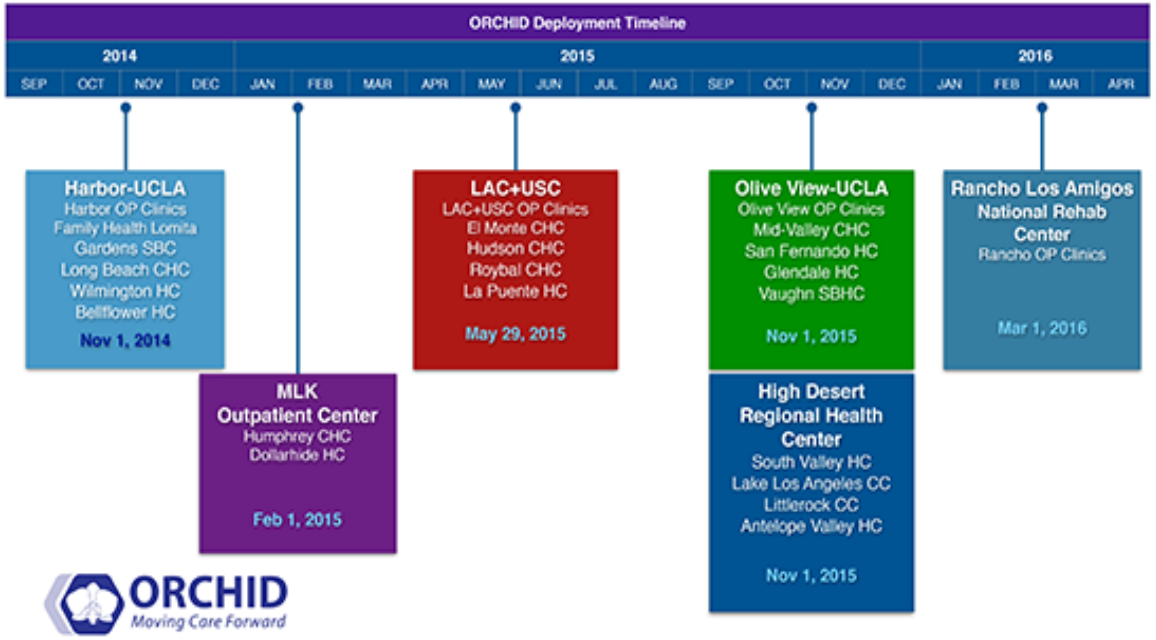
administrative staff



Kevin Lynch
Chief Information Officer



Robert Bart, MD
Chief Medical Information Officer



special projects & accomplishments

ORCHID's deployment timeline was updated following the LAC+USC Cluster Go-Live on May 29th.

Future Site Launches

Mar 1, 2016 - Rancho Los Amigos National Rehabilitation Center

Sites on ORCHID

Nov 1, 2014 - Harbor-UCLA Medical Center, Long Beach, Wilmington, Bellflower, Lomita & Gardena

Feb 1, 2015 - Martin Luther King, Jr. Outpatient Center, Humphrey & Dollarhide

May 29, 2015 - LAC+USC Medical Center, El Monte, Hudson, Roybal & La Puente

Nov 1, 2015 - Olive View-UCLA Medical Center, Mid-Valley, San Fernando, Glendale & Vaughn and High Desert Regional Health Center, South Valley, Lake Los Angeles, Littlerock & Antelope Valley

special projects & accomplishments (cont'd)

1. Enterprise Consolidated Fuji Synapse Picture Archiving and Communication Software (PACS) Implementation for ORCHID:

   The purpose of this project is to centralize six standalone Fuji PACS systems into a single virtual solution within DHS

2. Empanelment:

   The purpose of this project is to provide increased continuity between the patient and provider relationship through identification and allocation of special "care teams" targeted at various patient groups

3. Enterprise Patient Data Repository (EPDR):

   The purpose of this project is to improve patient health care delivery through the development of a trusted source of truth data warehouse for patient financial, utilization and clinical data

4. ICD-10 Migration:

   The purpose of this project is to maintain DHS compliance with Federal regulations through conversion of the new 5010 format for Electronic Claims and Billing Transactions. *The ICD10 Migration Program required completed by the October 1, 2015 deadline in order to avoid citations and monetary fines*

5. DHS Wireless Network Implementation:

   The purpose of this project is to provide wireless/Wi-Fi access to all DHS Hospitals & ACN patient care areas

6. DHS Local Access Network (LAN) Refresh Phase 1:

   The purpose of this project is to replace end-of-life/end-of-support LAN switches currently installed at all DHS facilities in support of ORCHID implementations

7. Virtual Desktop Infrastructure (VDI):

   The purpose of this project is to provide a consistent, efficient, flexible and reliable VDI environment to benefit all workforce members in DHS

8. Enterprise Credentialing (CACTUS) – COMPLETED:

   The purpose of this project is to create a trusted source of truth for provider credentialing data and feed that data real time to ORCHID along with feeding needed provider data to other sources needing this information including the DHS Enterprise Patient Data Repository (EPDR)

9. Enterprise Desktop Encryption – COMPLETED:

   The purpose of this project is to fulfill a Board of Supervisors mandate to encrypt all County workstation hard drives to increase the level of protection of confidential/sensitive data, including personally identifiable information and protected health information

2015/2016 objectives

- Successfully Implemented an Enterprise Help Desk that now serves as a standard single point of contact for all of information technology services. The goal of the Enterprise Help Desk is to ensure high quality, high availability access to all DHS IT systems. The Enterprise Help Desk consolidated existing independent help desk environments throughout the Department into one centralized point of contact for IT issues. All IT (issues, problems, requests) calls are routed to our Enterprise Help Desk

- Continued infrastructure upgrades for network switches at the remaining DHS facilities that have not yet completed as part of the original ORCHID infrastructure project. Additionally we will continue to upgrade / supplement PC devices at all DHS facilities as part of the infrastructure upgrade

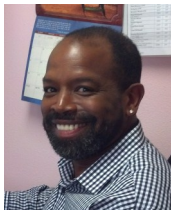
- Infrastructure upgrades to our LAN to ensure fast, redundant, resilient connectivity from network switches at the remaining DHS facilities that have not completed the ORCHID project. We will be replacing the current network switches within network closets with new standard Cisco switches

- Infrastructure improvements at each Facility and ACN site to upgrade / supplement PC devices in identified areas throughout DHS. Our goal will be to introduce 5,000 new devices (PC's and/or VDI devices) that will either upgrade (replace) existing devices or add to our inventory

Integrated Programs

Integrated Programs coordinates DHS initiatives and services that often involve collaboration with other County departments and serve specific patient populations in need of comprehensive, multidisciplinary approaches to their care. Selected programs and recent accomplishments:

Medical Hub Clinics - coordination of services at 6 DHS clinics serving children referred by the DCFS. The clinics provided 33,653 visits in FY 14-15, a 19.7% increase over the previous year. Accomplishments this year included development of a plan to implement recommendations by the Blue Ribbon Commission on Child Protection and to expand medical home services. Changes underway include expanding space and staffing, co-locating DMH staff on site, adding case managers and supporting an initiative pairing DCFS Public Health Nurses (PHNs) with social workers on home visits.





AB 109 Program – co-locates a DHS registered nurse and social worker with the Probation Department to assess health needs and coordinate needed health-related services for State prison releases returning to LA County on AB109 probation. For those needing Board and Care level housing, a mechanism was established with Probation and DHS Housing for Health's (HFH) Flexible Housing Subsidy Pool operator to search for placements and augment rates to house this hard-to-place population.

Record Retrieval Team – a team of nurses assists Department of Public Social Services (DPSS) in obtaining Supplemental Security Income (SSI) benefits for eligible GR recipients by reviewing and compiling the most pertinent DHS medical records and providing written healthcare summaries. In FY 14-15, the team completed 731DPSS record retrieval requests. To assist in determining eligibility, the team supports the HFH unit by providing medical and DHS utilization summaries for referred patients.

EPIC Program – integrates a Substance Abuse counselor into the LAC+USC and Harbor-UCLA Emergency Departments, along with co-located staff from DPH's Substance Abuse Prevention and Control Program, to identify and navigate patients directly to substance use disorder (SUD) treatment resources, including designated beds at DPH's Antelope Valley Rehabilitation Center (AVRC). A recent collaboration with DMH allows DHS funding for contracted mental health services to be provided to DHS patients receiving SUD treatment at AVRC.

Mental Health Liaison - provides oversight and coordination for DHS psychiatric services on a system-wide level and serves as liaison to the DMH

SB 474 Strategic Initiative Program - this program, which ended in August 2015 with the opening of MLK Jr. Community Hospital, has provided funding for 13 Community Partner clinics and 2 hospitals within 10 miles of the former MLK Jr.-Harbor Hospital to increase primary, specialty and urgent care visits to low-income, uninsured South L.A. residents



County-wide Initiatives – Integrated Programs collaborates with other County departments and community agencies on initiatives including Behavioral Health Integration, Family and Children's Index, Baby-Friendly Hospitals initiative, Commercially Sexually Exploited Children initiative among others.

administrative staff



Mark Ghaly, MD
Deputy Director,
Community Health

Jivaro Ray
Medical Hubs Program &
SB 474 Strategic
Initiative Program

Cindy Callado
Rosanna Clarito
GR Record Retrieval
Project Managers



Karen Bernstein
Director

Glynnis Mason
Venise Burwell
AB 109 Program

Melissa Christian
Mental Health Liaison

2015/2016 objectives

- At the Medical Hub clinics, further expand clinic capacity, integrate mental health services and streamline operations
- Expand partnerships with DPH and community organizations to increase DHS patient access to substance use disorder treatment
- Continue work with DMH to decompress DHS psychiatric emergency departments and lower percentage of patients in inpatient psychiatric units on administrative day status


Hocoma

Juvenile Court Health Services

JCHS is responsible for providing high-quality healthcare to youth who are detained in the LA County Probation Department juvenile detention facilities. JCHS operates clinics located at each of the 3 juvenile detention halls and 14 residential treatment camps. Each day there are approximately 1800 youth housed in these facilities and JCHS ensures that they all have access to complete healthcare services during their entire detention stay. JCHS' focus is on primary care and preventive care. Our staff of 13 full-time physicians and 140 nurses conduct full medical and psychosocial assessments upon admission, triage medical concerns every day and provide acute and follow-up care whenever needed. We also have a full dentistry staff, an optometrist, a laboratory and a full pharmacy which all collaborate to provide comprehensive care for our youth. Additionally, our Medical Records department manages our Probation Electronic Medical Record System (PEMRS). Every day, we work closely with the Departments of Probation and Mental Health to guarantee healthcare access and to coordinate any necessary services. The youth we serve are a high-risk group that frequently have many unmet medical and mental health needs when they enter the detention system. Recognizing the special needs of our patients, we also promote behaviors that will keep them healthy and engaged with the healthcare system when they return home.











administrative staff



Mark Ghaly, MD
Deputy Director
Community Health



Elena Laurich, CCHP
Administrator



Raymond Perry, MD, MS
Medical Director



Ferlie Villacorte RN, MSN/MPH
Nursing Director

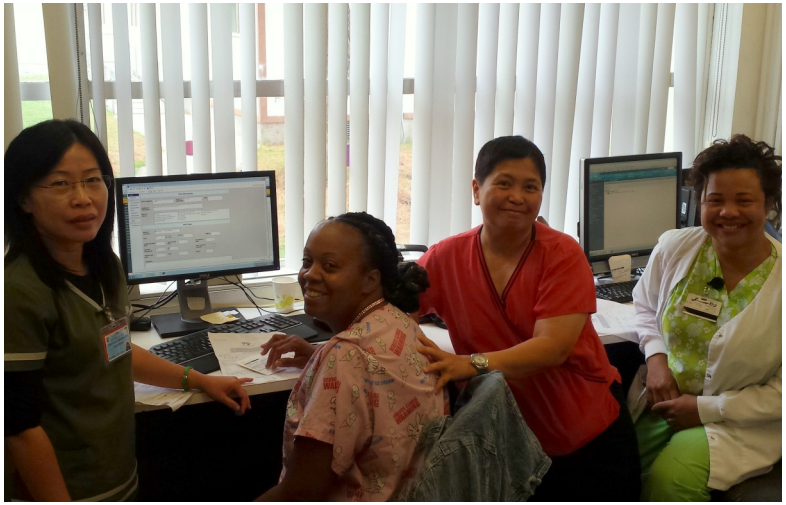
special projects & accomplishments

In 2014, JCHS completed our re-accreditation survey by the National Commission on Correctional Health Care (NCCHC) which occurs every 3 years. LAC facilities are among only a handful of juvenile detention systems nationwide that have met the high standards necessary to achieve accreditation. Our ability to do so is the result of a compassionate and dedicated staff, a commitment to providing all necessary healthcare services, support in providing emergency and specialty care from DHS' medical centers and a close and effective partnership with the Departments of Probation and Mental Health.

Along with the entire County's increased focus on improving services for commercially, sexually-exploited children (CSEC), JCHS has taken a strong initiative to provide better support, care and coordination of services for these vulnerable youth. We formed a committee of physicians and nurses who have led our department in developing a medical protocol, attended several trainings on CSEC issues, reached out to national experts for guidance and collaborated with community-based advocates, Probation Department, DMH and the Juvenile Courts to build a network of services that will support these youth while they are detained and when they are released home.

In addition to these major projects, our nurses achieved 100% competence this year; our staff participated in an enhanced emergency preparation drill; our leadership has played an integral role in planning the reconstruction and new programming model of Campus Kilpatrick residential treatment camp in Malibu; and our aftercare services continues to link more youth and families to DHS clinics in their home communities.









2015/2016 objectives

We look forward to continued success in achieving many goals, some of which will include:

- Implementation of on-site radiology services
- Development of a health training curriculum, led by our new Nursing Education Team, for Probation officers
- Implementation of universal, rapid HIV screening for all youth
- Development of a complete disaster preparedness program tailored to the specific needs of a juvenile detention system
- Implementation of a departmental CPR Certification Program for JCHS Staff
- Collaboration with Probation and Mental Health on strengthening services for commercially, sexually-exploited children
- Enhancement of partnerships with DHS outpatient clinics to connect youth with primary care medical homes in their communities
- Development of specialized staff training opportunities that address caring for youth in a correctional environment

Managed Care Services

Mission Statement- To support the Los Angeles County Department Health Services by providing managed care expertise to our customers. As an accountable, team of subject matter experts, we use innovative ways to educate and enable our customer to maintain managed care clinical, fiscal, operational and programmatic compliance.

The Managed Care Services Division (MCS) is responsible for providing assistance to DHS clinics and hospitals delivering health care services to managed care patients. MCS functions as the management services organization for DHS. MCS' core functions include, but are not limited to: medical management, provider network support, finance and claims management, reporting/data analytics, business development and patient relations and referral. Implementation of the federal Affordable Care Act's health insurance provision has significantly increased the number of insured patients served by the LAC-DHS. At the end of fiscal year 2014-15, almost 350,000 DHS patients had health insurance through managed care/health maintenance organizations. This represents almost 50% of DHS' entire patient population.

Through organized health care delivery systems and changes in reimbursement structures, managed care presents an opportunity to ensure quality of care, promote good patient outcomes and effectively monitor heath care expenditures. This benefits the DHS' insured and uninsured patients. During the 2014-15 fiscal year, DHS and MCS outlined several managed care priorities. Central among them was ensuring that both the quality of care and quality of service provided to patients was high and that high-quality patient experience is a focus throughout the organization. This is critical because DHS, like all other health care providers, works in a competitive environment in which managed care patients have choices and can select another provider if they are not satisfied with DHS' services. As a result, many of MCS' activities with DHS facilities are focused on ensuring patient retention. MCS analysis indicates that DHS facilities have been successful in retaining patients.



administrative staff



Tangerine Brigham
Deputy Director
Managed Care Services

Amy Luftig Viste, Program Director, My Health LA

Charlotte Piggee, Member Services Director, Patient Relations & Referrals

Dawn Flores, Patient Relations & Referrals Director

Diana G. Vasquez, RN, JD, Quality Management & Clinical Compliance Director, Medical Management

Lauren Simmons, Chief Information Officer, Managed Care Information Systems

Lucy Cruz-Nakamura, Payor Contracting Manager

Nancy Pe Quilino, Provider Network Support & Operations Director

Pamela Ricks-Hawkins, RN, BSN, Utilization Management Director, Medical Management

Peter Balingit, MD, FACP, Interim Chief Medical Officer

Rogers Moody, Finance Services Director, Financial Services

Rosemarie Lugo, Human Resources & Facilities Support Manager

Rowena M. Roxas, CPC, MPA, Claims Management Manager, Financial Services

Fiscal Year 2014-2015, DHS MCS has excelled by the following:

Business Development

- Created a Business Development Unit within MCS focused on business analysis, payor contracting and communications/marketing
- Worked with Rancho Los Amigos and entered into contract to provide medical services to veterans referred by Veteran Administration Medical Centers under a new VA Patient-Centered Community Care (PC3) and Veterans Choice Programs

Finance/Claims

- Successfully improved MCS' responsiveness to non-DHS providers seeking payment for services provided to DHS patients by transferring the Claims Department call center function into the MCS centralized Patient Call Center

Managed Care Services Infrastructure (Facilities, Information Systems, etc.)

- Released a RFP to replace MCS' information system used for tracking data on all managed care and empaneled patient, and selected a proposed contractor for consideration

Medical Management (Credentialing, Quality and Utilization)

- MCS was delegated credentialing of DHS providers (clinics and hospitals) by Health Net and LA Care, its health plan partners
- The Quality Management Team centralized the collection, processing and analyzing of Child Health and Disability Prevention (CHDP) PM160 forms from DHS facilities for submission to health plan partners. These forms are used to report preventive health services for children (i.e., well child visits, weight assessment, counseling for nutrition, physical activity and immunizations)
- Successfully transferred responsibility for processing medical necessity denials of service from DHS-wide referral centers to the MCS Utilization Management Unit to ensure compliance with regulatory requirements, and appropriate and timely notification to managed care patients and providers

My Health LA (MHLA)

- Implemented MHLA program along with launch of One-e-App, a web-based application intake, eligibility determination, and system of record for the program
- Enrolled over 120,000 individuals by the end of Fiscal Year 2015 (6/30/2015)

Patient Relations & Referrals

- Improved DHS' compliance with health plan guidelines and patient experience by providing guidance to new managed members on scheduling their Initial Health Assessment

Provider Network and Support

- Successfully transitioned MCS's Grievance & Appeals and My Health LA Complaints Tracking System to the DHS-wide Systems Intelligence (SI) System
- Effectively coordinated with contracted health plans to ensure a smooth transfer of providers and affected managed care patients to two new DHS facilities (HDRC and MLK Jr. OC) without disruption of care

special projects & accomplishments

- Implemented a Patient Experience/ Satisfaction Survey which contacts new patients after their first primary care visit to determine how their experience was. This information is analyzed and provided to DHS' clinics to address any concerns that patients may have to improve patient experience and retention
- DHS launched the MHLA program in October 2014, which is a health access program for eligible uninsured Los Angeles County residents. This was the culmination of a collaborative planning effort between DHS, the Community Clinic Association of Los Angeles County and community advocates



2015/2016 objectives

- Patient Retention
- Increase Payor Revenue Contracts
- My Health LA Launch

Office of Nursing Affairs (ONA)



administrative staff



Christina R. Ghaly, MD
Deputy Director
Strategy and Operations



Vivian Branchick, MS, RN
Director

nurse recognition

The Office of Nursing Affairs (ONA) proudly recognizes and celebrates the DHS nurses. The ONA takes a lead role in organizing the Los Angeles County-Wide Outstanding Nurse Program, overseen by Los Angeles County Nurse Recognition Steering Committee. Nurses working in the various County Departments were nominated by their peers and considered for the honor of Outstanding Nurse of the Year. This process is standardized throughout the County and evaluation is based on their excellence in clinical performance, patient advocacy, leadership, role modeling, teamwork, education, community service, and professional development.
The Annual Los Angeles County Nurse Recognition Week is held in May to recognize, and honor all Los Angeles County Nurses for their commitment and dedication. The Los Angeles County Board of Supervisors proclaimed May 3rd through 9th, 2015 as the 32nd Annual Los Angeles County Nurse Recognition Week. On May 12, 2015, the Los Angeles County Board of Supervisors presented fourteen scrolls to outstanding nurses from the following County departments; Department of Health Services, Public Health, Mental Health, Fire Department, Sheriff's Department and Department of Children and Family Services.

nurse recruitment and retention

DHS ONA in collaboration with facility nursing leadership teams implemented a standardized nurse staffing plan for in-patient units and hospital based clinics. FY 2014-2015 is the first year of a 4 year plan for nurse staffing plan implementation. This year has been a very successful year for recruitment, thanks to our human resources team who conducted multiple on-site recruitment fairs. A total of 717 new nursing employees, an increase of 32% from the previous FY, were hired into the DHS System.
The Nurse Recruiters are based in four different facilities; Harbor-UCLA, LAC+USC Medical Center, Olive View-UCLA Medical Center, and Rancho Los Amigos National Rehabilitation Center to provide convenient on-site services to the applicants/candidates. We collaborate with HR Exams Unit, Operations Unit, and hiring managers to expedite the hiring process. We assist in various Civil Service Examination processes to ensure an adequate pool of applicants for all DHS facilities. Our efforts to bridge the experience, knowledge, and skills of the nurse and other health care professionals have been rewarded by increased hiring of nursing staff. We continue to implement standardized Nurse Retention Plan to increase staff retention. The team will continue to work diligently to attract and recruit knowledgeable and clinically skilled nursing staff to our system.

special projects & accomplishments

The ONA provides support and strategic direction to DHS facilities and supports strategic alliances and partnerships for DHS nursing services

ONA oversees the following programs: Education Compliance Unit, Recruitment and Retention Program, Tutoring and Mentoring Program, Antonovich Scholarship Program, Nurse Relocation Program, Central Education Unit, Workforce Development Program, Diversity and Cultural Competency and the College of Nursing,

FY 14-15 Special Projects and Accomplishments

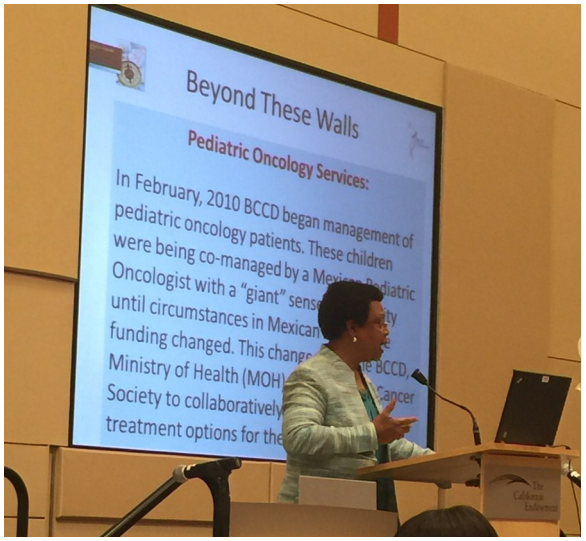
- Implemented a standardized nurse staffing model for patient care areas with mandated AB 394 nurse to patient ratio and hospital based clinics
- Provided oversight for the Internal Registry Program pilot at LAC+USC. The program will be rolled out to all DHS facilities in FY 15-16
- Collaborated with facility Chief Nursing Officers (CNOs) on a grant funded by Blue Shield to mentor and train nurses at our Patient Centered Medical Homes (PCMH) on continuous quality improvement processes
- Conducted a nursing workforce satisfaction survey of licensed nurses

education compliance program

The Education Compliance Program coordinates Nursing and Allied Health Competency Testing at all DHS hospitals and clinics, as well as Juvenile Court Health Services, Emergency Medical Services, and Managed Care Services. The goal of the Education Compliance Program is to confirm competence of Direct and Indirect Patient Care providers in core roles and responsibilities throughout the department, who serve the healthcare needs of diverse populations in Los Angeles County.
In 2014, a total of 9971 County workforce members comprised of 7224 nurses and 2747 allied health personnel, completed competency assessment and testing. Non-county workforce members tested in 2014 totaled 1180. During 2014, the DHS system-wide Competency Program facilitates the learning and assessment process through simulation of performance skills with the use of live models where feasible, ensuring patient safety, infection control practices, customer service, and discipline specific measures of competence. Simulation-enhanced technology is utilized to augment competency assessment processes. The Education Compliance Unit works with the ONA to provide pre-assessment testing for licensed contract nurses and improve pre-assignment processes and timely acquisition of contract personnel where needed to meet critical patient care needs.



Healthcare Workforce Development Program



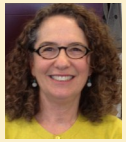
administrative staff



Christina R. Ghaly, MD
Deputy Director
Strategy and Operations



Vivian Branchick, MS, RN
Director
Nursing Affairs



Diane Factor
Director

educational programs to support transformation in DHS

The Health Care Workforce Development Program (HCWDP) continued to implement workshops and programs in support of the transformation of the healthcare delivery model to a preventive and primary care model. HCWDP worked closely with DHS managers and Service Employee Internation Union (SEIU) Labor partners to align efforts with the DHS strategic plan, with both career pathway programs and skill enhancement workshops.

The Worker Education & Resource Center (WERC) the non-profit organization that delivers curriculum development and instructional services to operate the HCWDP program was able to secure funding from The California Endowment to develop, with DHS, a Community Health Worker (CHW) education and training program. The first cohort of 25 CHW is now deployed at five outpatient sites in East and South Los Angeles.

Nineteen DHS nurses who obtained degrees as Family Nurse Practitioners were promoted and are now working in DHS Specialty Care Clinics. This completes a US Department of Labor grant that was a partnership between WERC, the DHS ONA and Charles Drew University.

critical skills building

WERC continues to provide training to support DHS workers with basic computer skills to be successful on the ORCHID electronic health record database. WERC will continue with workshops at Olive View Medical Center, Rancho Los Amigos Rehabilitation Center, and a number of comprehensive health centers in 2015-16.

WERC instructors continue to facilitate a popular workshop to improve communication and customer service skills for workers who have interaction with patients and the public. Paired with a coaching skills workshop for frontline managers, the program hopes to continually improve the patient experience in DHS facilities.

WERC will also provide a Spanish language for Healthcare workers course for employees motivated to improve their ability to provide a positive patient experience for Spanish-speaking patients.

WERC is also engaged with DHS and the SEIU Local 721 in providing a skills building workshop for labor-management committees focused on effectiveness and workplace environment improvements for staff and patients.

preparing the healthcare workforce of the future

WERC continues to operate out of the Wellness Center at the Historic General Hospital, and now has training space on the MLK Jr. campus in the old hospital. WERC is providing training for community residents who want to become healthcare workers, and offer programs that focus on improving health outcomes in the Boyle Heights and South LA communities.




ZEV YAROSLAVSKY FAMILY SUPPORT CENTER


County of Los Angeles
Department of Health Services
www.dhs.lacounty.gov
Ambulatory Care Net
EMERGENCY MEDICAL SERVICES AGENCY
LOS ANGELES COUNTY
Harbor-UCLA
MEDICAL CENTER
LAC+USC
MEDICAL CENTER
Olive View-UCLA
MEDICAL CENTER
RANCHO LOS AMIGOS
NATIONAL REHABILITATION CENTER

Pharmacy Affairs

The LA County Department of Health Services, Pharmacy Affairs is a system-based department focused on promoting and optimizing the use of medications throughout the system's multiple sites of care. Proactive unified formulary management, centralized pharmaceutical purchasing, development of standardized system policies, medication safety and automation standardization, and tracking of medication use data are coordinated to optimize the use of pharmaceutical resources in a manner that promotes safe, evidence-based and cost-effective outcomes. Managed care medication management and prior authorization reviews are centrally coordinated in collaboration with medical leadership, which are focused on maximizing patient outcomes.
DHS Pharmacy Affairs collaborates with the DHS Core Pharmacy & Therapeutics Committee, DHS Specialty Workgroups, and the DHS Medication Safety Committee to support and promote outcome-based and safe medication use.







administrative staff



Hal F. Yee, Jr., MD, PhD
Chief Medical Officer



Amy Gutierrez, PharmD
Chief Pharmacy Officer

Sarah Brody, PharmD
Jeffrey Melnick, PharmD
Tony Chou, PharmD
Clinical Pharmacists

Shane D'Souza, PharmD
Chief, Pharmacy Procurment, Contracting and Data Analytics

Nadrine Balady-Bouziane, PharmD
Pharmacy Chief, Ambulatory Care

Kevin Vu, PharmD
Supervisor, Formulary Management and Specialty Pharmaceuticals

Sam Lee, PharmD
Supervisor, Pharmacy Procurement

Ketan Patell, PharmD
Supervisor, Medication Safety/ Pharmacy Automation Integration

Christine Ke , Data Analytics
Cheryl Ariate, Data Analytics

special projects & accomplishments

- In 2014-15, DHS established an operational pharmacy dashboard that tracks system metrics across all outpatient pharmacy sites, focused on the goals of increasing operational efficiency.
- In 2015, DHS expanded its pharmacy mail service program as part of its offsite central fill prescription process. This central fill high volume automation pharmacy is now fully operational, and processes over 15,000 prescriptions per week. Over 400 prescriptions per week are mailed out to DHS patients, with a goal of expanding this service in the coming year.
- DHS processed pharmaceutical manufacturer patient assistance program applications valued at over $3.8 million during 2014-15, providing critical medication access to uninsured patients

2015/2016 objectives

- Improve customer-focused outpatient pharmacy performance metrics
- Expansion of pharmacy mail service program and central fill pharmacy processing to facilitate access
- Medication clinical standardization and medication safety enhancement across all settings
- Expansion of pharmacist provider role in ambulatory care settings
- Patient medication adherence strategies for chronic care disease management






SARANAC



Office of Planning & Data Analytics

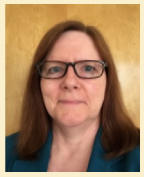
The Office of Planning and Data Analytics helps guide key decision making in the Department of Health Services. We evaluate a wide range of healthcare programs, policies, procedures and departmental operations. Our goal is to support DHS' mission to "ensure access to high-quality, patient-centered and cost-effective healthcare" by using data to lead the way. We also collaborate with and deliver research and analysis to other Los Angeles County departments and external stakeholders.



administrative staff



Anish Mahajan, MD
Director
System Planning Improvement & Data Analytics



Irene Dyer, MS MPH
Director



Toki Sadralodabai, PhD
Chief of Analytical Services

Nicole Bronson, PhD
Research Analyst

Kimberly Brown, MSW
Research Analyst

Arturo Caballero
Assistant Staff Analyst

Cindy Lou Cantu, MA
Research Analyst

Annie Luong
Secretary

Guili Zheng, PhD
Research Analyst

Jorge Garcia, MPH
Staff Analyst

Lisa Greenwell, PhD
Research Analyst

Michael Lim, MPH
Epidemiologist

Vichuda Matthews, DrPH
Epidemiologist

Alma Vazquez, BS
Information Systems Analyst

Enterprise Patient Data Repository (EPDR)

The mission of the EPDR project is to provide the data infrastructure that enables DHS to provide higher quality care to more people at lower cost. Phase 1, which was successfully completed, will help DHS meet the financial claiming and reporting requirements for the 1115 Waiver. Phase 2 is in development and will enable internal reporting for HEDIS, managed care, outpatient productivity and medication management. Phase 2 completion is slated for Spring 2016.

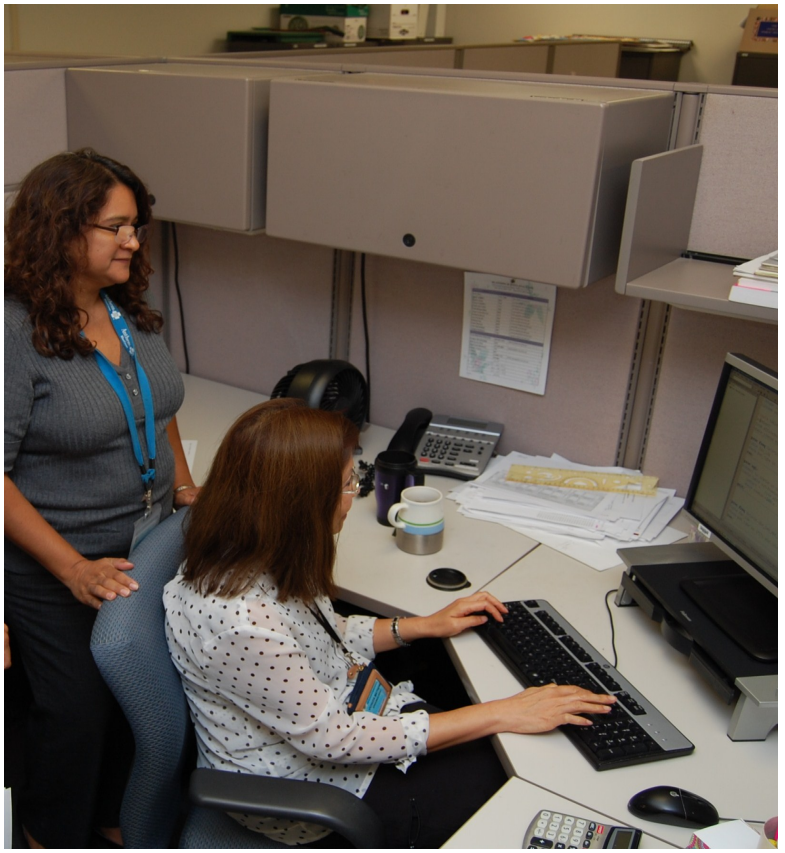
data governance and data use

Data Governance:

The process of organizing and managing data quality and consistency across DHS began by standardizing over 20 ORCHID data elements. To achieve the goal of superior level data quality, consistency and usability, numerous workgroups across DHS continue to meet to standardize additional data elements. Data Stewards have now been identified and will focus on clinical and operational needs, implementing data standards and monitoring data quality across DHS.

Data Use:

A DHS Data Use Steering Committee has been created and is undertaking the development of standards and definitions for the use of data throughout DHS. Activities include prioritization of report development and management of analytic and report-writing resources for all DHS electronic data systems.



2015/2016 objectives

- EPDR Phase 2: To successfully complete the addition of clinical and managed care data to EPDR
- Establish a Business Intelligence Competency Center (BICC) to support user-friendly data analytics and reporting capability throughout DHS
- Collaborate with our sister County departments on data sharing initiatives



collaborations

- ORCHID: Implementation workgroup participation; data and reporting governance
- DSRIP: Calculating the population-focused improvement indicators as well as completing the DSRIP annual and semi-annual reports through coordination with other offices
- HEDIS: Providing required data for DHS Managed Care population to Health Plans
- Empanelment: Providing utilization information
- PES: Analysis to identify admission predictors and comparison of longitudinal outcomes

Quality Improvement & Patient Safety

Mission: Our mission is to facilitate DHS in its pursuit of high quality and safe patient care.

QIPS Core Values: Trust, Patient Centeredness, Collaboration, Transparency, Reliability, Integrity, Expertise, Adaptability

The Quality Improvement and Patient Safety (QIPS) program provides leadership in quality improvement, patient safety and clinical risk reduction across the Department's system of hospitals and clinics. QIPS coordinates its activities through several DHS committees including the Executive Quality Improvement Committee, Patient Safety Committee, Risk Management Committee, and "Effective Practice" groups. QIPS also participates in the ORCHID project providing expertise in the area of quality, patient safety, and risk management.



quality improvement

QIPS facilitates system-wide improvement initiatives that are aimed to: promote 'systemness' and decrease variation in the care provided; increase transparency and facilitate communication between providers and patients; and improve outcomes for our patients. QIPS oversees the improvement, measurement, and reporting of numerous standardized quality indicators. This year's quality initiatives focused on two areas, 1) inpatient quality initiatives designed to meet the milestones of the Section 1115 Medicaid Demonstration Waiver which "…embody the principles of health care reform – expanding access to care, enhancing quality, improving population health and containing costs"; and 2)Healthcare Effectiveness Data and Information Set (HEDIS®) initiatives. HEDIS measures are designed to allow consumers to compare health plan performance across plans on preventive services such as breast cancer screening and on disease management such as comprehensive diabetes care. In our commitment to the 1115 Waiver, we focus on evidenced-based care measures: prevention and treatment of venous thrombolytic (VTE) events, acute stroke management and targeted preventative services including: well child care, breast and cervical cancer screening and diabetic care.

administrative staff



Hal F. Yee, Jr., MD, PhD
Chief Medical Officer



Arun Patel, MD, JD
Director

Sandra Aleman, RN
Liz Augusta, RN, MSN
Mary Ayrapetyan
Marife Mendoza, RN, MBA-HCM
Gwen Dupree Pittman
Terry Edmond, RN
Sherli Fernandez, RN, BSN CCRN
Graciela Garcia

Deon Hall, RN, BSN
Nancy Lefcourt, RN, MSN
Olivia Lo
Caesar Sanchez
Ronaldo Scotland, MPH
Evelyn Szeto, CLS
Christina Tickner, RN, MSN
Lily Wu

clinical risk reduction

Clinical risk reduction occurs as the natural outgrowth of QIPS' quality improvement and patient safety activities. Two committees, the Executive Peer Review Committee and the DHS Risk Managers Committee, target areas of actual or potential vulnerability and develop improvement plans to address the identified vulnerabilities. Improvement plans are designed to reduce the frequency and severity of adverse events in terms of human injury and financial loss and identify opportunities for preventing these adverse events from happening again. QIPS is currently leading a county-wide project involving the adoption of a clinical risk reduction system which can integrate incident reporting, claims management and complaints management. This system is expected to be implemented in those county departments that provide medical services including DHS, Sheriff, Mental Health, Public Health, and Fire.



2015/2016 objectives

- Decrease mortality of sepsis and stroke patients
- Improved outreach for disease prevention and management
- Formal proactive risk-assessment at facilities
- Launch department-wide re-education and implementation of Safe & Just Culture

special projects & accomplishments

1115 Waiver Project

- Helped to obtain significant DHS funding though the coordination of quality initiatives accomplishing the 1115 Waiver milestones
- Led efforts to reduce the rates of sepsis, surgical site infection, and central line bloodstream infection in all DHS hospitals

Patient Safety

- Coordinated two day patient safety conference for 225 DHS staff
- Hosted two day Patient Safety University Training
- Completed DHS-wide patient safety culture assessment
- Developed Safe & Just Culture algorithm and education materials
- Led efforts in adverse event related disclosure, apology and early resolution



Risk Management

- Oversaw management of 127 claims and adverse events
- Reviewed over 80 improvement plans for system-wide application
- 42% reduction in aggregate malpractice settlement amount over prior year

Special Projects

- Led Department-wide Ebola preparedness efforts in coordination with local, state-wide and national agencies
- Spearheaded County-wide adoption of electronic event reporting system and implementation of Department wide complaints tracking system

Risk Management

Mission Statement: To support the delivery of high-quality, patient-centered, cost effective health care to LA County residents through delivery of value based (non-clinical) risk mitigation initiatives.

Risk Management supports the aforementioned mission through provision of the following non-clinical central support services:

- Industrial injury (workers' compensation) management
- Facilitation of enterprise return to work initiatives for industrial and non-industrial matters in compliance with ADA and FEHA requirements
- Government tort claim and litigation management for non-medical malpractice matters
- Professional occupational safety, asbestos, industrial hygiene and environmental compliance services

Risk Management works directly with all DHS facilities to provide the aforementioned shared services and supported significant enterprise efforts related to: 1) Emergency Code Standardization; 2) Safe & Just Culture Algorithm development; and 3) decision logic related to competency failures with disability overlays.

claims & litigation unit

The Risk Management Claims & Litigation Unit created a multi-user Database during the fiscal year to enhance the management of non-medical malpractice and litigated workers' compensation claims for DHS. The database monitors employee work assignments, provides task based tracking capabilities and can be leveraged across all lines of liability. The Claims & Litigation Team managed to close 254 matters during the FY and provided support for 5 trials — 80% of which resulted in defense verdicts. The Unit has also actively worked to promote early dispute resolution initiatives such as informal mediation and the use of non-monetary proposals/solutions when viable. Additionally, there was a 28% reduction in the number of General Liability Claims compared to last FY which contributed to the Department's overall 7% reduction in total liability claim performance.



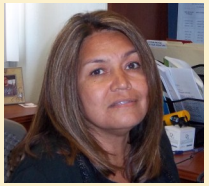
administrative staff



Arun R. Patel, MD, JD, MBe
Director of Quality,
Patient Safety
& Risk Management



Edgar Soto, MBA, CSP
Risk Manager



Michelle Merino
Return to Work
Manager



Chi Fong, MSChE, CSP
Health, Safety &
Environmental
Manager



Karen White, JD
Claims & Litigation
Manager

return to work (RTW)

The RTW Unit supports enterprise management of industrial accidents (IA), medical leaves of absence (LOA) in excess of six months and reasonable accommodation processes. RTW managed an average of 253 discrete long term leaves per month during the FY and administered roughly 3479 active industrial claims.

Notable Statistics

- 7.2% reduction in the total number of IA claims FY over year
- Completion of 1,706 interactive process meetings in accordance with Fair Employment and Housing Act requirements
- Assisted EHS with the triaging of 48 physical clearances and facilitated a total of 14 medical separations during the fiscal year
- Managed 822 temporary and 93 permanent employee accommodations based upon medical restrictions/limitations

Further, Return to Work, commenced development of a Procedural Desk Manual—scheduled for implementation during FY 2015-16—which will standardize various complicated aspects of the Unit's work and will provide a useful tool for training new staff to ensure consistent, measurable and efficient processing. Interactive Process Meeting tracking and quality assurance mechanisms continue to be implemented so as to ensure timely documented interactions with all staff to ensure statutory compliance and drive continuous process improvement and accountability.

health, safety & environmental unit accomplishments:

- Completed ergonomic evaluations for 176 employees, saving approximately $100,000 in direct costs versus contracting services to outside consultants and offsetting an estimated $3 M in future workers' compensations expenses and legal liabilities
- Acquired surplus ergonomics equipment including 128 adjustable chairs,12 footrests and 7 keyboards, internally and from another County Departments, for redistribution to employee with a zero net cost to the Department
- Performed 9 timely industrial hygiene assessments and studies to address facility and employees concerns related to thermal comfort parameters, asbestos and nuisance particle/dust issues saving $40,000 - $60,000 in third party consultant fees
- Assisted DHS acute care hospitals with Ebola waste consideration analysis and working with QIPS on dynamic regulatory agency requirements pertaining to personal protective equipment guidelines.
- Supported the Labor Management Transformation Committee in standardizing the Department's Emergency Code System to ensure that all acute care and clinic locations use a universal code system for facility response further enhancing the safety of our workforce, patients and visitors.



Specialty Care Improvement Initiative

Connecting health providers in a "Patient Centered Medical Neighborhood"

Specialty care is most effectively delivered in collaboration with the patient's medical home. With the full deployment of eConsult and continued improvement activities of the Specialty Primary Care (SPC) Workgroups, patients have begun to experience the positive impact of a more integrated delivery system. The following entities are partnering together in eConsult and/or the SPC Workgroups.

All Community Partner/My Health LA organizations

Department of Public Health

Department of Mental Health

Los Angeles County Sheriff's Medical Services Bureau

Juvenile Courts Health Services

Department of Health Services



Investing in the Patient Centered Medical Neighborhood

- Our Specialty-Primary Care (SPC) Workgroups continue to be the centerpiece of DHS efforts in Specialty Care Improvement. In each clinical discipline, a workgroup comprised of specialists representing our various facilities together with Primary Care providers, is empowered to make care improvements in a system-wide manner, utilizing the resources currently available to them. We now have 30 SPC Workgroups focused on care improvement.

- Expected Practices are documents developed by the SPC Workgroups that articulate a DHS wide approach to delivering health care that is high quality, patient centered and cost effective. There are currently over 100 Expected Practices posted on the DHS Clinical Care Library.



administrative staff



Hal F. Yee, Jr., MD, PhD
Chief Medical Officer



Paul T. Giboney, MD
Director
Specialty Care

Specialty Care Initiative Team Members

Chris Barragan

Gary Garcia, MPH

Danny Johnson

Monica Soni, MD

eConsult

In 2015 DHS completed its expansion of eConsult to all DHS and Community Partner clinics. In addition, the Sheriff's Department Medical Services Bureau, the Department of Public Health and the Juvenile Courts Health System now use eConsult as well. There are over 3,700 participating primary and specialty care providers and 420 specialist reviewers using the system. We are pleased to report an average 2.7 day specialist response rate in the 58 eConsult specialty services. DHS specialists respond to more than 13,000 new eConsult requests each month

ORCHID — eConsult integration

Leveraging two key tools to coordinate and deliver high quality patient care, an interface has been built that allows completed eConsult information to become a part of the patient's ORCHID record.

building collaboration and integration

- Diabetes Day (pictured) - over 180 medical providers and their support teams convened to learn about advances in diabetes care and discuss their practical applications.
- eConsult User Forums (pictured) - PCPs and Specialists collaborated regarding more effective use of eConsult.

using innovation to deliver specialty services

- Primary Care Based Teleretinal Diabetic Retinopathy Screening Initiative led by Dr. Lauren Daskivich deployed in all DHS facilities. 1,000+ retinal photos taken and read each month.
- The Specialty Nurse Practitioner Program —in partnership with Charles Drew University and the DHS Department of Nursing, 20 specialty NPs have been placed in 13 high-need specialty areas county-wide.





2015/2016 objectives

- Use new data tools and dashboards to provide accurate and actionable specialty specific information to SPC Workgroups, facility and DHS executive leadership.
- Improve DHS' ability to apply the shared resources of its entire system including the tools of eConsult, expected practices, ORCHID and centralized scheduling to improve access, enhance quality, facilitate care coordination/transitions of care and reduce variability across our facilities.

Supply Chain Operations Network

Supply Chain Operations key objective is to support the medical supply needs of our patient care providers. Our Clinical Value Analysis teams drive the clinical trials and strategic sourcing for medical/surgical commodities. Our Cost Analytics team rigorously reviews and analyzes each item being considered for inclusion into our distribution formulary of products. Procurement ensures timely processing of requisitions. The Warehouse is responsible for replenishment, inventory management, accurate receipt and disposition of products and equipment. The Invoice Processing Teams handle all accounts payable activity. SCO IT supports eProcurement and the various operating systems required to support DHS Supply Chain Operations.



2015/2016 objectives

- eCAPS/GHX system implementation for Harbor-UCLA and MLK Jr.
- GHX upgrades and new modules
- New automation tools and applications for contact management, Purchasing, Invoice Processing, and Warehouse Operations
- Continue to improve product quality, cost and savings

special projects & accomplishments

- $6.156 million in validated savings from product changes, utilization changes, price reductions
- $5.983 million in vendor rebates and e-Recovery
- Purchasing support for the ORCHID implementations
- Launched Value Analysis sub committees
- eCAPS Item Master implementation
- Warehouse replenishment software implementation
- Improved OLR processing time by 10 days

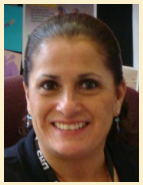
administrative staff



Gregory C. Polk
Deputy Director,
Administrative Operations



Gary McMann
Chief
Supply Chain Network



Teri Castaneda
Assistant Chief
Supply Chain Operations



Susan Newsom
Administrator
Clinical Analytics (Interim)


WELCOME
CARE HARBOR LA
LA Care
CONTAMINATED HANDPIECES
CONTAMINATED HANDPIECES
CONTAMINATED HANDPIECES





Teleretinal Diabetic Retinopathy Screening Program

Diabetic retinopathy (DR) is the leading cause of blindness among working-age adults in the United States, but blindness can be prevented in >90% of cases by prompt laser therapy. Unfortunately, due to barriers to access to care that prevent early identification and treatment of eye disease in the Los Angeles County safety net, rates of preventable blindness due to DR are substantially higher than in the general population. In the Los Angeles County health care system, wait times for retinal examinations for patients with newly diagnosed diabetes have historically been as high as 6-9 months, and the screening rate for diabetic retinopathy in 2013 was only 30.1%. Failure to receive timely and appropriate care for diabetic retinopathy is a major problem for LA County, where the prevalence of diabetes in Latinos of predominantly Mexican ancestry approaches 50%. To address this problem, we instituted a teleretinal screening program for diabetic retinopathy. This program allows for routine screening via retinal images taken with a fundus camera in primary care or diabetes clinics, with subsequent analysis by trained readers to determine presence and extent of diabetic eye disease. Teleretinal DR screening eliminates the need for a separate visit to an eye care provider for those with normal images. It also preserves the ophthalmologists' time for treatment and monitoring of those patients who have evidence of substantial retinopathy on their retinal photograph.

administrative staff



Hal F. Yee, Jr., MD, PhD
Chief Medical Officer



Lauren Patty Daskivich, MD, MSHS
Director, Ophthalmological Services and Eye Health Programs

Elizabeth Southern, CMA
Program Coordinator

2014/2015 accomplishments

- Implementation of the teleretinal DR screening program in all of the LAC Department of Health Services Medical Centers, MACC/OPCs, and Comprehensive Health Centers: Claude Hudson CHC, Wilmington HC, El Monte CHC, High Desert RHC, H. H. Humphrey CHC, Long Beach CHC, Mid Valley CHC, Olive View UCLA MC, Harbor UCLA Family Medicine Clinic, MLK Jr. OPC, Rancho Los Amigos NRC, Roybal CHC, LAC+USC MC, and Harbor UCLA MC
- Establishment of a DHS-wide Teleretinal Reading Center: 52 teleretinal photographers utilize a web-based software platform to upload patient data and photos to a central server and 10 certified readers interpret screening results and make referral recommendations across DHS
- Improvement in screening rates and triage: as of June 2015, 14,590 patients have been screened. Of these, 9,898 (68%) did not need a referral to an eye care provider, 2,931 (20%) required referral for diabetic retinopathy, and <5% needed an expedited visit for treatment. Prior to this program, all 14,590 patients (100%) would have been referred into the eye clinics for screening.
- Providing feedback on performance: our program provides quarterly dashboard reports to the LAC DHS community, showing the monthly volume at each facility and referral numbers

program goals

Overall program goal: eliminate the need for a separate visit to an ophthalmologist for patients with minimal disease and expedite treatment for those with greatest need.

Initial program goal: screen all empaneled diabetics within the first two years of the program.

2015/2016 objectives

- Focus on streamlining workflows and scheduling pathways
- Improve integration with ORCHID and eConsult systems
- Increase total volume of patients screened via teleretinal imaging to reflect the LAC DHS empaneled diabetic population


COUNTY OF LOS ANGELES BOARD OF SUPERVISIORS
DON KNABE
SUPERVISOR, FOURTH DISTRICT
HILDA L. SOLIS
SUPERVISOR, FIRST DISTRICT
MARK RIDLEY-THOMAS
SUPERVISOR, SECOND DISTRICT
SHEILA KUEHL
SUPERVISOR, THIRD DISTRICT
MICHAEL D. ANTONOVICH
SUPERVISOR, FIFTH DISTRICT
INTERIM CHIEF EXECUTIVE OFFICER
SACHI A. HAMAI
DIRECTOR, DEPARTMENT OF HEALTH SERVICES
MITCHELL H. KATZ
CEO, RANCHO LOS AMIGOS
JORGE OROZCO
DIRECTOR, DEPARTMENT OF PUBLIC WORKS
GAIL FARBER
ARCHITECTS
TAYLOR DESIGN / SMITHGROUP JJR
CONTRACTOR
McCARTHY BUILDING COMPANIES, INC.
RANCHO LOS AMIGOS HOTLINE
(562) 219 - 4771
PROJECT WEBSITE:
WWW.RANCHO.ORG
RANCHO LOS AMIGOS
NATIONAL REHABILITATION CENTER
COUNTY OF LOS ANGELES
SMITHGROUP JJR
TAYLOR
McCARTHY
AN INTEGRATED TEAM
Rancho Rising 2020:
Building on Our History of Hope and Healing
Pharmacy Technician
Administration
Doctor

Women's Health Programs & Innovation (WHPI)

The Office of Women's Health Programs and Innovation (WHPI) was awarded a competitive grant for more than $2 million dollars from the Centers for Medicare and Medicaid Services (CMS) to transition prenatal care to a comprehensive, continuous, and coordinated Maternal-Centered Medical Home (MCMH) model. The goal of the initiative is to reduce the rate of preterm and low-birthweight births and improve care for pregnant women and newborns in the safety net. The new DHS model, Maternity Assessment, Management, Access and Service synergy (MAMAs Neighborhood) is an innovative prenatal care program that utilizes evidence based strategies that: 1) leverage community based partners to complement and augment care for mothers during the perinatal period, creating a Neighborhood Network of Care; 2) enhances capacity of clinical care staff via continuous quality improvement and training; 3) enhances perinatal care through a collaborative care team model; and 4) engages mothers in their care decisions. This Network of Care provides support services that address mothers' needs in the areas of food/ nutrition scarcity, substance use, housing instability, mental health and resiliency, and family and social support. MAMAs Neighborhood also includes the complement of nutrition, health education and psychosocial services regularly offered through the Comprehensive Perinatal Services Program (CPSP).

2014/2015 accomplishments

- 6 DHS sites now offer MAMAs Neighborhood: Harbor UCLA, LAC+USC and Olive View –UCLA; MLK Jr. Outpatient Center, Hubert H. Humphrey CHC and Wilmington Health Center
- 7 Care Coordinators (Community Health Workers) have enrolled 1531 mothers
- All mothers are risk stratified based on an initial intake using standard scales to assess social support, stress and a variety of other risk factors. In our program 5% of women were found to be high risk, 25% moderate and 70% lower risk (Jan 1 2014-June 30 2015). This intake determines the frequency and intensity of care management provided by the Care Coordinators
- Care Coordinators provided peer counseling, referrals and linkages including: 172 housing referrals; 1052/91/119 to WIC/food banks/food stamps respectively; 312 nutrition counseling; 306 job training-GED; 218 transportation; 242 dental health; 214 domestic violence/trauma exposure; 257 substance use; 40 mothers (and some partners too!) have attended 21-weekly prenatal health education and resiliency classes One-hundred thirty-eight (138) women were assisted during outreach events by 3 Health Educators
- Mental health support from licensed clinical social workers was provided at 983 encounters

So far, 91% of MAMAs program births were at >37 weeks (term) and at normal weight



administrative staff



Hal F. Yee, Jr., MD, PhD
Chief Medical Officer



Erin Saleeby, MD, MPH
Director
Women's Health Program and Innovation

Dannelle Pietersz, NP, MSN, MPH

Moraya Moini, MPH

women's health quality initiatives

WHPI coordinates the quality improvement efforts for Women's Health metrics within DHS. The four areas of focus during FY 14/15 were the HEDIS measures for breast and cervical cancer screening as well as timely prenatal and postpartum care. Working with the Expected Practices from the WHAC, quality and performance improvement plans have been developed across the system in order to improve our population health management. Through the efforts of quality leaders at all of our sites, our rates in all four measures have improved with some facilities showing more than 30% increases in screening rates!

women's health specialty primary care workgroup

The group has overseen the implementation of the eConsult portals for Obstetrics and Gynecology, through which specialty reviewers have collectively provided 8,557 consults in FY 14/15.

At HUMC, generalist OB/GYNs provide approximately 300-400 consults quarterly and the Department is evaluating the sub-specialty care provided in conjunction with eConsult. A sub-group of patients re-routed via eConsult to UroGynecology were noted to have had tried at least 2 prior conservative therapies prior to their visit in 70% of cases, indicating a positive effect of the consultation with primary care in initiating pre-surgical management . The majority of patients and doctors had a good experience with the system. Some 82.2% of patients stating that they were satisfied with their ability to get a specialty appointment for their pelvic floor disorder and more than 80% of referrals seen face-to-face felt to be appropriate by the sub-specialists.





In addition, the group engaged a broader mix of Women's Health providers in discussion about the Expected Practices for our DHS system by forming the Women's Health Advisory Council (WHAC). The WHAC represents a cross-section of nationally recognized women's health specialists that identified and created 35 expected practice (EP) standards for commonly encountered women's health problems. To date, 25 of these have been published on the Clinical Care library, providing a common foundation for practice in our community.

title x family planning

WHPI oversees the provision of high-quality sexual and reproductive health services in our outpatient clinics including: contraceptive services, pregnancy testing, pelvic exams, screening for STDs and HIV, basic infertility services, social services, health education classes, and screening for breast & cervical cancer. DHS women's health clinics now offer a full range of services including all FDA approved contraception methods. Title X funds also support critical activities that are not reimbursable under Medi-Cal, Family Planning, Access, Care, and Treatment (FPACT), or commercial insurance such as infrastructure improvements, individual patient education and community outreach. WHPI staff provides ongoing clinical and nursing staff development to guarantee quality family planning services as well as STD screening and treatment to its population.

In 2014, WHPI was awarded a $214,000 federal Family Planning and HIV Integration Grant. The grant was given to support the integration of routine HIV testing and linkage to HIV care and treatment in Title X family planning service sites. Through the grant, DHS has implemented HIV opt-out rapid testing services in three Women's Health clinics; Hubert H. Humphrey Comprehensive Health Center (HHH), H. Claude Hudson Comprehensive Health Center (Hudson), and Harbor-UCLA N28 Women's Clinic (N28). WHPI staff worked with the Department of Public Health's (DPH) Division of HIV and STD Programs (DHSP) which is providing the rapid HIV tests, counseling training, quality assurance and support.

2014/2015 accomplishments:

- Family planning services were expanded to include 5 additional clinics providing sexual and reproductive health services
- 44 RN's, LVN's, Medical Assistant's, Community Workers, and Health Educator staff trained in the Family planning Health Worker course
- Addition of the Reproductive Life Plan to the ORCHID Nursing Intake and Sexual History
- 3000% increase in the number of opt-out HIV tests done at 3 clinics
- 57 Sexual and Reproductive Health related in-services and trainings conducted

Department of Health Services Fiscal Overview Fiscal Year 2014/2015 Actual

administrative staff

Allan Wecker
Chief Financial Officer

Efrain Muñoz
Associate Financial Officer

Larry Gatton
Revenue Services Chief

Mela Guerrero
Controller

Thomas Jewik
Program Audits/Reimbursement Chief

Manal Dudar
Fiscal Services Expenditure Manage

Hitomi Rice
Fiscal Programs Chief

Lily-Wun Nagaoka
Financial Systems Chief

COUNTY OF LOS ANGELES

DEPARTMENT OF HEALTH SERVICES

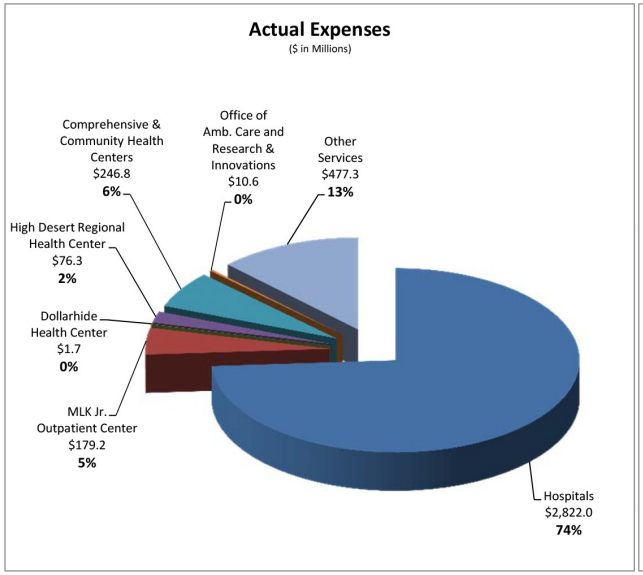
FISCAL OVERVIEW

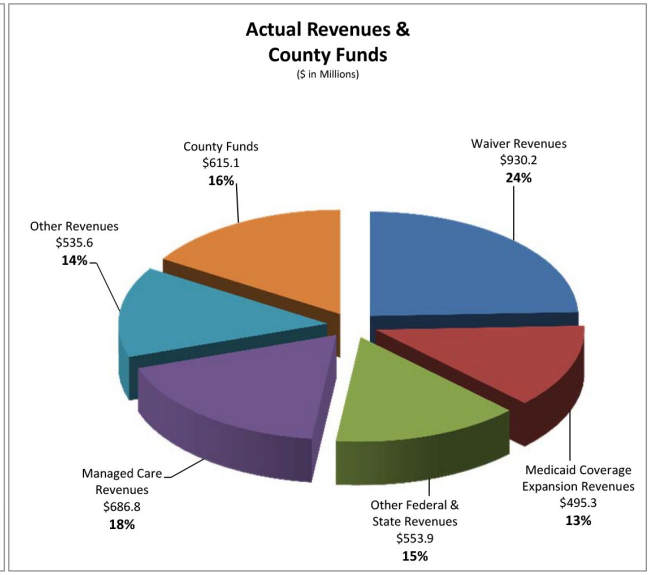
FISCAL YEAR 2014-15

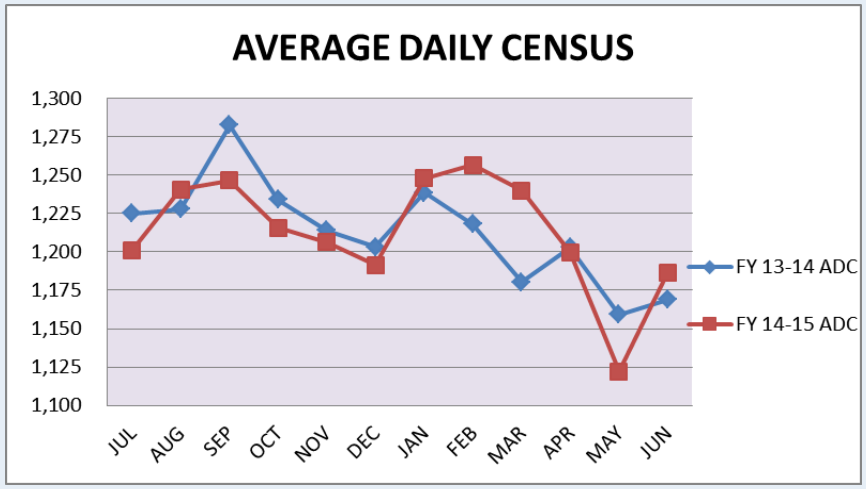
($ IN MILLIONS)

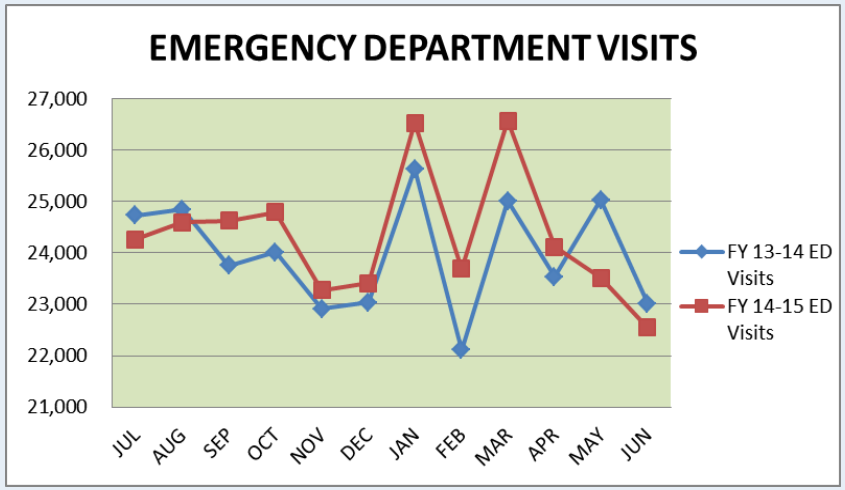
	BUDGET	ACTUAL								SURPLUS / (DEFICIT)
	(A)				Ambulatory Care Network				(B)	(A - B)
	Total Department	Hospitals [a]	MLK Jr. Outpatient Center	Dollarhide Health Center	High Desert Regional Health Center	Comprehensive & Community Health Centers	Office of Amb. Care and Research & Innovations	Other Services [b]	Total Department	Total Department
Salaries and Employee Benefits	$ 2,199.1	$ 1,678.3	$ 70.0	$ 1.5	$ 41.9	$ 159.4	$ 6.9	$ 228.7	$ 2,186.7	$ 12.4
Services, Supplies, & Other Expenses [c]	1,729.0	1,143.7	109.2	0.2	34.4	87.4	3.7	248.6	1,627.2	101.8
Total Expenses	3,928.1	2,822.0	179.2	1.7	76.3	246.8	10.6	477.3	3,813.9	114.2
Waiver Revenues [c]	1,172.1	892.0	(32.3)	0.1	35.2	(0.1)	(2.9)	38.2	930.2	(241.9)
Medicaid Coverage Expansion	495.6	340.9	51.1	-	13.3	90.0	-	-	495.3	(0.3)
Other Federal & State Revenues	476.1	476.4	20.3	-	(4.7)	45.4	4.9	11.6	553.9	77.8
Managed Care Revenues [c]	473.4	430.0	(60.5)	(0.4)	28.2	299.1	17.1	(29.7)	683.8	210.4
Other Revenues	534.6	367.7	(9.0)	-	6.3	4.5	(0.5)	166.6	535.5	0.9
Total Revenues	3,151.8	2,507.0	(30.4)	(0.3)	78.3	438.9	18.6	186.7	3,198.8	47.0
Funding from County	$ 776.3	$ 315.0	$ 209.6	$ 2.0	$ (2.0)	$ (192.1)	$ (8.0)	$ 290.7	$ 615.1	$ 161.2

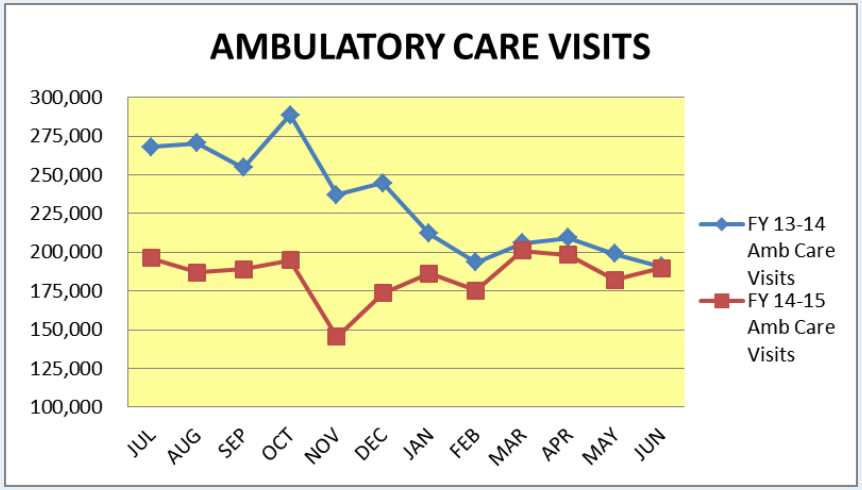
(a) Includes LAC+USC, Harbor-UCLA, and Olive View-UCLA Medical Centers, and Rancho Los Amigos National Rehabilitation Center.
(b) Includes Juvenile Court Health Services, Office of Managed Care, Online Real-time Centralized Health Information Database, Emergency Medical Services, and other administrative services.
(c) Net of Intergovernmental Transfers for Delivery System Reform Incentive Pool, Medi-Cal Managed Care for the Seniors and Persons with Disabilities, and Managed Care Rate Supplement and the associated revenues.

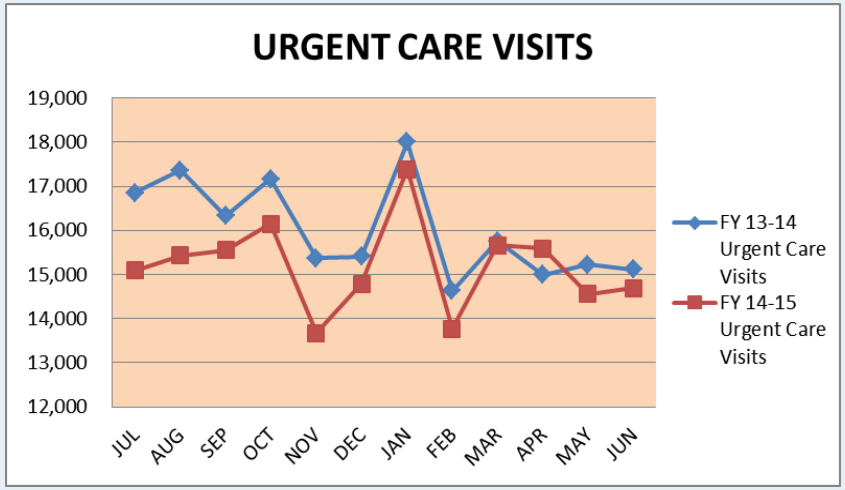


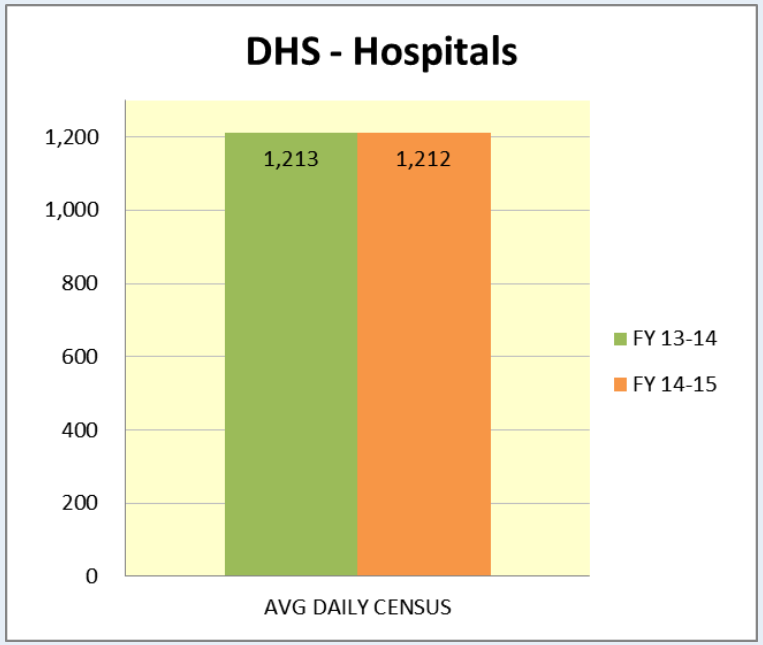


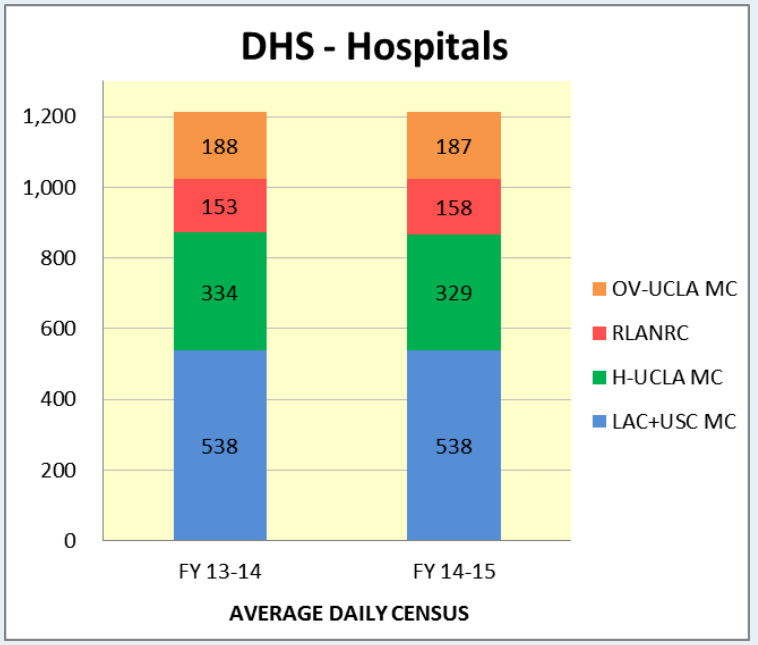

AVERAGE DAILY CENSUS
1,300
1,275
1,250
1,225
1,200
1,175
1,150
1,125
1,100
JUL
AUG
SEP
OCT
NOV
DEC
JAN
FEB
MAR
APR
MAY
JUN
FY 13-14 ADC
FY 14-15 ADC

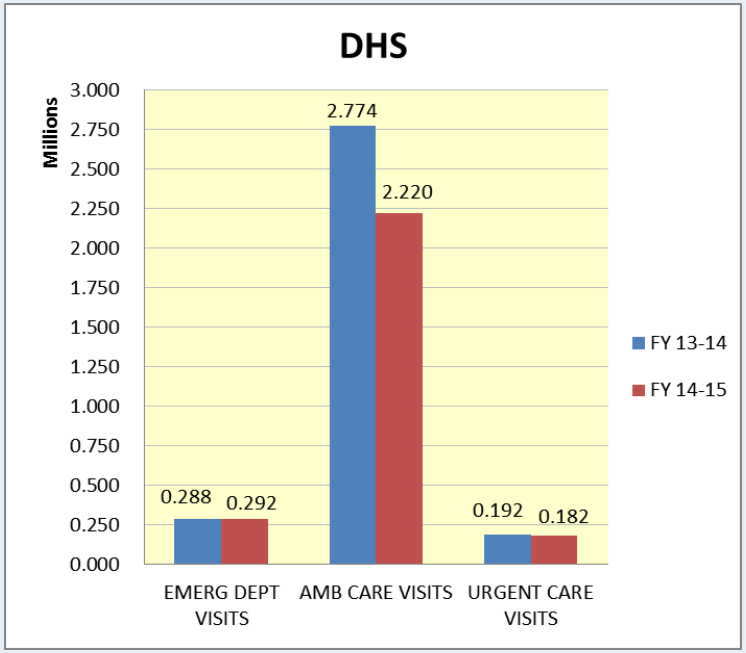

EMERGENCY DEPARTMENT VISITS
27,000
26,000
25,000
24,000
23,000
22,000
21,000
JUL
AUG
SEP
OCT
NOV
DEC
JAN
FEB
MAR
APR
MAY
JUN
FY 13-14 ED Visits
FY 14-15 ED Visits

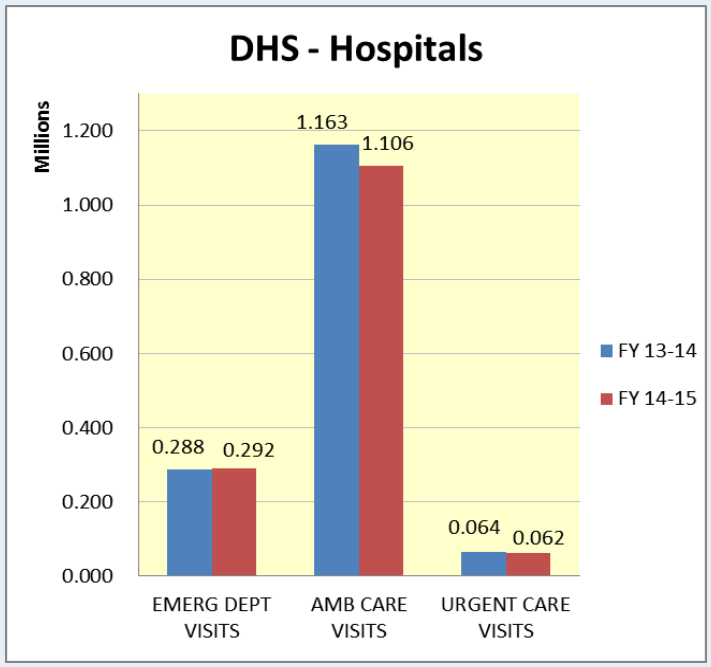

AMBULATORY CARE VISITS
300,000
275,000
250,000
225,000
200,000
175,000
150,000
125,000
100,000
JUL
AUG
SEP
OCT
NOV
DEC
JAN
FEB
MAR
APR
MAY
JUN
FY 13-14 Amb Care Visits
FY 14-15 Amb Care Visits

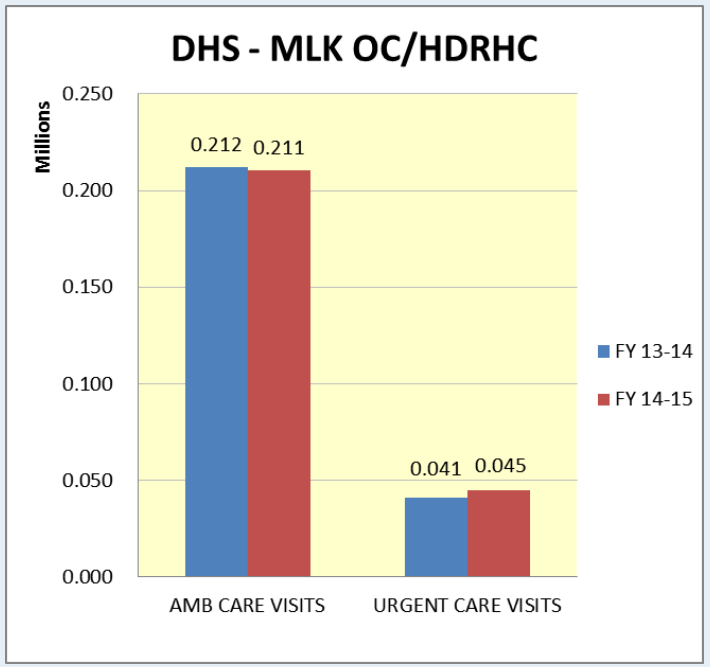

URGENT CARE VISITS
19,000
18,000
17,000
16,000
15,000
14,000
13,000
12,000
JUL
AUG
SEP
OCT
NOV
DEC
JAN
FEB
MAR
APR
MAY
JUN
FY 13-14 Urgent Care Visits
FY 14-15 Urgent Care Visits

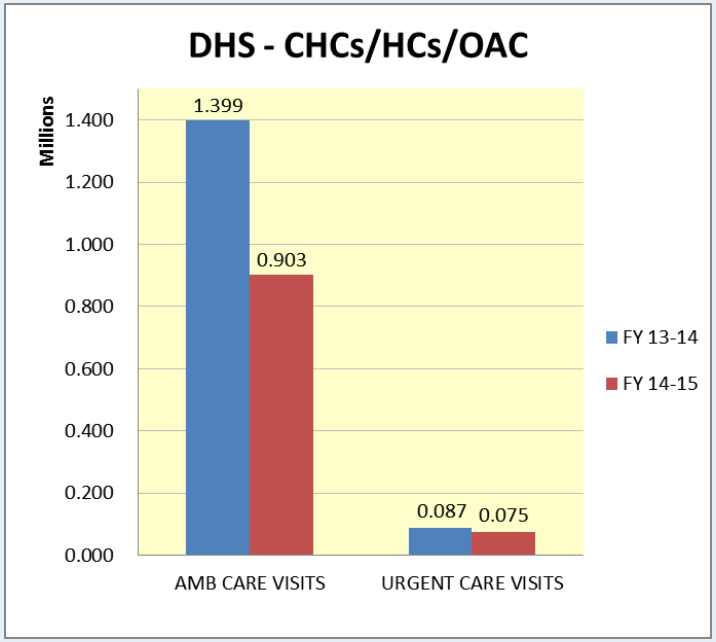

DHS - Hospitals
1,200
1,000
800
600
400
200
0
1,213
1,212
FY 13-14
FY 14-15
AVG DAILY CENSUS


DHS - Hospitals
1,200
1,000
800
600
400
200
0
188
153
334
538
187
158
329
538
OV-UCLA MC
RLANRC
H-UCLA MC
LAC+USC MC
FY 13-14
FY 14-15
AVERAGE DAILY CENSUS


DHS
Millions
3.000
2.750
2.500
2.250
2.000
1.750
1.500
1.250
1.000
0.750
0.500
0.250
0.000
0.288
0.292
2.774
2.220
0.192
0.182
FY 13-14
FY 14-15
EMERG DEPT VISITS
AMB CARE VISITS
URGENT CARE VISITS

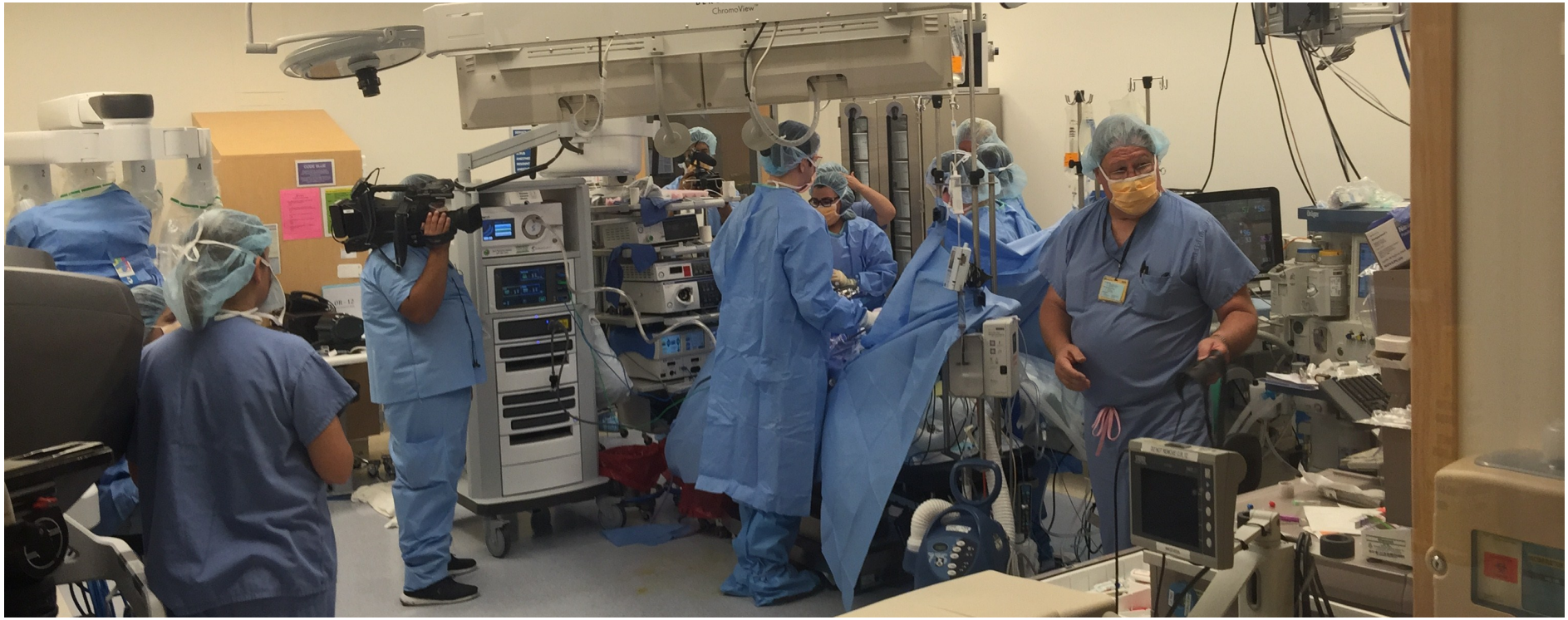

DHS - Hospitals
Millions
1.200
1.000
0.800
0.600
0.400
0.200
0.000
1.163
1.106
0.288
0.292
0.064
0.062
EMERG DEPT VISITS
AMB CARE VISITS
URGENT CARE VISITS
FY 13-14
FY 14-15


DHS - MLK OC/HDRHC
Millions
0.250
0.200
0.150
0.100
0.050
0.000
0.212
0.211
0.041
0.045
AMB CARE VISITS
URGENT CARE VISITS
FY 13-14
FY 14-15


DHS - CHCs/HCs/OAC
Millions
1.400
1.200
1.000
0.800
0.600
0.400
0.200
0.000
1.399
0.903
0.087
0.075
AMB CARE VISITS
URGENT CARE VISITS
FY 13-14
FY 14-15


PARTNERSHIP FOR QUALITY CARE
County Of Los Angeles
HARBOR-UCLA
MEDICAL CENTER
Partnering for a
Health Community
Public Health



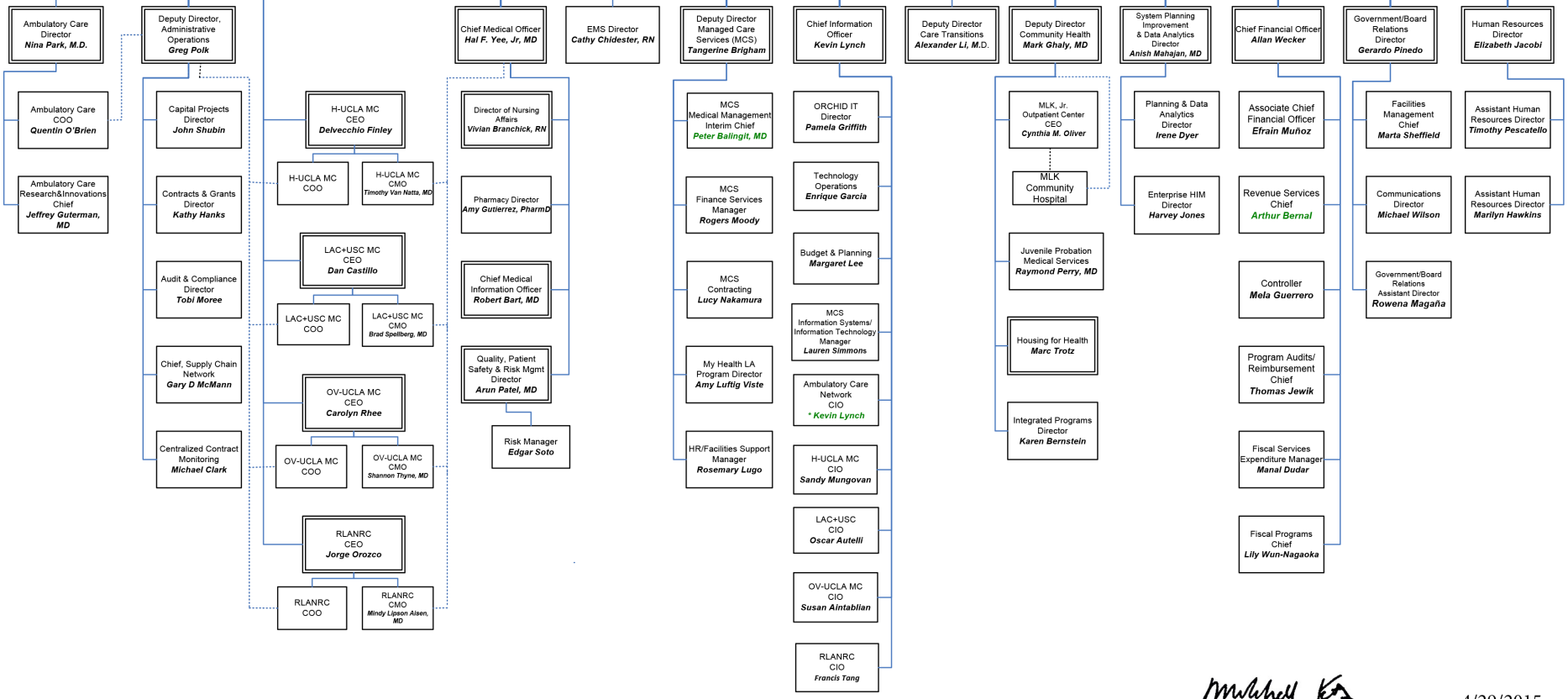

ChromoView




Erik
7
Christian
Larry
4
Barb
4
Keck Medical
Center of USC
Rancho Los Amigos
National Rehabilitation Center



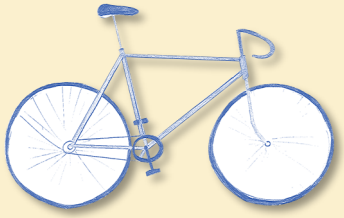
Department of Health Services
Organizational Chart



** Interim*

Mitchell H. Katz, MD
Director

4/29/2015
Date



For inquiries regarding this publication please contact the
Office of Government Affairs & Communications



Gerardo Pinedo, Editor
Lisa Finkelstein, Co-Editor
Robin T. Young, Graphic Designer
Karl Pascasio, Illustrator



313 N Figueroa Street, Room 912
Los Angeles, CA 90012
(213) 240-8104
(213) 240-7988

This publication was designed in house by County employees utilizing existing resources.

To ensure access to
high-quality
patient-centered
cost effective
health care to
los angeles county residents
through direct services at
DHS facilities
and through collaboration
with community and university partners

Health Services
LOS ANGELES COUNTY