

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

Quality Improvement Committee Meeting

December 20, 2017

9:30 am – 11:30 am

AGENDA

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|------------------------------|------------------|
| 1. Welcome and Introductions | Stacey Fonseca |
| 2. Review of the Minutes | Stacey Fonseca |
| 3. QI/QA Process | Crittenton |
| 4. QA Trends | Robin Washington |

Quality Improvement

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| 1. Clinical QI: OMD Report – Safety Int. Reminder | Margaret Faye |
| 2. Policy Update | Gassia Ekizian |
| 3. Patients’ Rights | Stacey Fonseca |
| 4. Cultural Competence Update | Margaret Faye |
| 5. Fall 2017 MHSIP Update | Stacey Fonseca |
| 6. ACCESS Center | Gassia Ekizian |
| 7. Provider Directory | Stacey Fonseca |

Quality Assurance Liaison Meeting

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| 1. Schedule of Trainings and Presentations | Gassia Ekizian |
| 2. Annual LE QA Report | Margaret Faye |
| 3. QA Meetings and Contact List | Stacey Fonseca |

Other Issues

- | | |
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| 1. Announcements | All |
| 2. Future QIC topics | All |

Next Meeting: January 17, 2017

Location: Enki, 3208 Rosemead Blvd, 2nd Floor, El Monte, CA 91731

Parking at lower level only

**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
PROGRAM SUPPORT BUREAU
QUALITY IMPROVEMENT DIVISION**

Type of Meeting	Service Area 3 QIC	Date	12/20/2017	
Place	ENKI - 3208 Rosemead Blvd., 2nd Floor, El Monte, CA 91731.	Start Time:	9:30 am	
Chairperson Co-Chairs	Dr. Stacey Fonseca Mrs. Gassia Ekizian Dr. Margaret Faye	End Time:	10:58 am	
Members Present	<i>Margaret Best</i> <i>Mark Rodriguez</i> <i>Annie Borjorquez</i> <i>Leslie Shrager</i> <i>Estera Boresa</i> <i>Stacey Fonseca</i> <i>Elizabeth Mota</i> <i>Robin Washington</i> <i>Zerri Gross</i> <i>Michael Olsen</i> <i>Windy Luna-Perez</i> <i>Gassia Ekizian</i> <i>Margaret Faye</i>	<i>Alma</i> <i>Bridges</i> <i>CA Mentor</i> <i>Children's Bureau of SoCal</i> <i>Crittenton Services</i> <i>DMH</i> <i>DMH</i> <i>DMH</i> <i>D'Veal Corporation</i> <i>ENKI</i> <i>Etti Lee Homes</i> <i>Foothill Family Services</i> <i>Hathaway-Sycamores</i>	<i>Vivian Chung Easton</i> <i>Grace Kim</i> <i>Natasha Montiel</i> <i>Gerry Bonilla</i> <i>Karen Sammon</i> <i>Rachel Mayer</i> <i>Lorraine Romero</i> <i>Rebecca deKeyser</i> <i>Nancy Othman</i> <i>Keri Zehm</i> <i>Rocio Bedoy</i> <i>Hannah Chuapoco</i>	<i>Healthright 360 Prototypes</i> <i>Heritage Clinic</i> <i>Hillsides</i> <i>Homes for Life Foundation</i> <i>Maryvale</i> <i>PUSD</i> <i>Rosemary Children's Center</i> <i>San Gabriel Children's Center</i> <i>SPIRITT Family Service</i> <i>Tri-City MH</i> <i>Tri-City MH</i> <i>Trinity-El Monte</i>

Agenda Item & Presenter	Discussion and Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Call to Order & Introductions	The meeting was called to order and followed with self-introductions.		
Review of Minutes	Motion to approve the minutes by Michael Olsen and seconded by Rocio Bedoy.	Please see handout.	
QI/QA Process	Estera Boresa presented from Crittenton. The agency is very policy oriented. Focus on turnaround time on progress notes & engagement with clients. There are monthly walk-throughs in each office to check on compliance. During the walk-through, one random chart audit is completed. After the walk-through, a note is sent out on what went well and areas of improvement. They use Relias for training. Staff attend two days of training upon hiring. QA and QI information is shared during staff meetings. A mileage program (SureMobile) is used to cross check with EXYM (the EHR) to make sure a note is complete. D'Veal will present at next month's meeting.		
QA Trends	<p>Initial Assessment trends include:</p> <ol style="list-style-type: none"> 1. Documentation of Medical Necessity was found to be a strength 2. Need more focus on strengths and risks of clients 3. Better diagnostic summaries and tying things together—don't repeat just repeat information 4. There is a tendency to not complete necessary addendums <p>Treatment Plan trends include:</p> <ol style="list-style-type: none"> 1. Vague objectives 2. Need to targeting the correct problems <p>Progress Note trends include:</p> <ol style="list-style-type: none"> 1. Most are timely and have needed elements 2. Confusion about rehab and therapy 3. Notes should be more succinct 		

Agenda Item & Presenter	Discussion and Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Clinical QI: OMD Report – Safety Int. Reminder	All agencies should have their C number and attended the webinar. The webinar is recorded. Reviewed two letters from the OMD office related to sharing information.	Please see handouts.	
Policy Update	Reviewed Policy information	Please see handout.	
Patients’ Rights	COP logs are due the 10 th of each month. Please ensure that your organization is submitting the updated COP form and that the provider number for each one you are submitting is written in the subject of the email. If these things are not done the log will come up as missing.		
Cultural Competence Update	An organizational review was done and a lot of good feedback was received. Sandra will present next month. This year we should be tracking that 100% staff complete cultural competency training.		
Fall 2017 MHSIP Update	Thank you for participating. There was an increase in surveys, close to 15,000 surveys. Reminder: The second part is due 1/15/18 for the open-ended comments.		
ACCESS Center	If you cannot accept referrals, please contact ACCESS and inform them. Do not refer back to ACCESS center. There was an increase in calls during the mental health awareness campaign.	Please see handout.	
Provider Directory	Updated version is about to come out. If you have edits, please contact Dr. Fonseca.		
Schedule of Trainings and Presentations	Reviewed upcoming trainings. Any agency that has room for 50+ people and available parking can offer to host.	Please see handout.	
Annual LE QA Report	Due at the end of January, an email will be coming out soon.		

Agenda Item & Presenter	Discussion and Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
QA Meetings and Contact List	QA Contact information for all SA was provided. As a result of the Clinical PIP, a training on working with high-risk populations will be offered at the Covina office in April. An email will be sent out soon with two different training dates.	Please see handout.	
Announcements	Foothill is hiring for Quality Improvement Manager. Contact Gassia for more information.		
Handouts	<ol style="list-style-type: none"> 1. Agenda 2. Meeting Minutes: November 15, 2017 3. Policy Update 12/11/17 4. DMH Memo and FAQs regarding receiving and sharing client information 5. Quality Assurance Contacts by Service Area 6. Access Center Calls Answered within 1 Minute 7. Documentation Training Schedule 		
Next Meeting	Next Meeting is January 17, 2018 (9:30 a.m. – 11:30 a.m.) at ENKI, 3208 Rosemead Blvd., 2 nd Floor, El Monte, CA 91731.		

Respectfully Submitted, Dr. Keri Zehm, Tri-City Mental Health