

COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH

SA 8 QUALITY ASSURANCE/QUALITY IMPROVEMENT COMMITTEE  
MEETING AGENDA

September 20, 2017

2:00 – 4:00 p.m.

DMH SA 8 Administration – MultiPurpose Room  
2600 Redondo Ave – 6<sup>th</sup> Floor  
Long Beach, CA 90806

Co-chairs: Emily Ramos (LBMH), Michele Munde (Star View), Courtney Stephens (MHALA)  
SA 8 QI/QA Liaison: Ann Lee, SA 8 Administrative Support: Karina Wagner

**QUALITY IMPROVEMENT (QI) MEETING**

2:00-3:00

1.	<b>Welcome/Introductions/Announcement</b>  <i>New SA 8 Provider Co-Chair! Please congratulate Courtney Stephens from MHA who was appointed our 2<sup>nd</sup> Provider co-chair effective 9/11/17. Thank you to all those that applied or considered taking on this responsibility.</i>
2.	<b>Clinical Quality Improvement – OMD Report</b>
3.	<b>SA QIC Reports &amp; Countywide Children’s QIC Report</b>
4.	<b>Compliance, Privacy, &amp; Audit Services (CPAS) Bureau – Policies Updates*</b>
5.	<b>Cultural Competence Updates</b> The next mtg will be held on October 11 <sup>th</sup> , 1:30-3:30pm, 550 S. Vermont, 10 <sup>th</sup> fl conf rm. <b>Conference Call Info: USA Toll-Free: 888-204-5987 Access Code: 1167059#</b>
6.	<b>EQRO Review FY 2017-2018</b>
7.	<b>Patients’ Rights Office Updates</b> <ul style="list-style-type: none"><li>• Grievance and Appeals Updates</li></ul>
8.	<b>Change of Provider Logs Update</b> – Process seems greatly improved. SA 8 is doing well with timely submission of logs. September logs will be due by 10/10/17. Please send to <a href="mailto:DMHCOP@dmh.lacounty.gov">DMHCOP@dmh.lacounty.gov</a> only. Do <u>NOT</u> email or copy the logs to Jose’s individual email.
9.	<b>SA 8 ACCESS Test Calls</b> – Completed 11 calls in August: <ul style="list-style-type: none"><li>• 6 Regular hours calls – 2 English (including 1 beneficiary call), 1 Spanish, 1 Spanish crisis call, 1 Khmer, 1 Korean</li><li>• 5 After hours calls – 3 English (1 of which was a crisis call), 1 Spanish, 1 Korean</li></ul> <i>Thank you to call volunteers!!!</i>

\*Handouts

**Next SA 8 QI/QA Meeting Info:**

October 18, 2017 2:00-4:00 p.m.

DMH SA 8 Administration, 2600 Redondo Ave, Long Beach, CA 90806

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Co-chairs: Emily Ramos (LBMH), Michele Munde (Star View), Courtney Stephens (MHALA)

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**QUALITY ASSURANCE (QA) MEETING**

3:00-4:00 p.m.

1.	<b>Announcements</b> – There will be no monthly QA chairs meeting in October to inform our meeting agenda. Discuss possible agenda items, discussion topics, or presentations.
2.	<b>Audits &amp; Reviews</b> <u>Auditor Controller:</u> St. Anne's - 9/19 <u>MR Grant:</u> Contact the Compliance, Privacy, and Audit Services Bureau if issues come up. <ul style="list-style-type: none"><li>• Exempt employee timecard update: Auditor Controller Handbook</li></ul>
3.	<b>Medi-Cal Certification Section</b> – Quarterly rpt from State – LA is in 100% Compliance
4.	<b>State DHCS Updates</b> <ul style="list-style-type: none"><li>• Waivers (Reasons for and Ethical Responsibilities)</li></ul>
5.	<b>Training and Operations</b> <ul style="list-style-type: none"><li>• Schedule of Trainings and Presentations*</li><li>• Update: Treatment Plan Presentations during QICs</li><li>• SA Lead Updates</li><li>• LE Chart Reviews Update: TGC coming up in Oct, Starview – conducted Sept 13-15</li></ul>
6.	<b>Policy and Technical Development</b> <ul style="list-style-type: none"><li>• State Info Notice No: 17-040 (QA div will issue a bulletin)</li><li>• FINAL QA Bulletin 17-15 Revised: Physician Assistants &amp; Advanced Practice Pharmacists/Clinical Pharmacists Added to A Guide to Procedure Codes*</li><li>• Update: Drug Medi-Cal for Directly Operated is on hold</li><li>• QA Contacts for Providers – email David Crain (dcrain@dmh.lacounty.gov)</li></ul>
7.	<b>Upcoming Items:</b> <ul style="list-style-type: none"><li>• <i>Therapeutic Foster Care</i></li><li>• <i>Review of DMH Policy &amp; Procedures owned by QA</i></li></ul>

\*handouts

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**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH  
SA 8 QUALITY IMPROVEMENT/QUALITY ASSURANCE (QI/QA) MEETING  
Minutes, September 20, 2017**

<b>Type of Meeting</b>	Service Area 8 Quality Improvement/Quality Assurance (QI/QA) Committee			<b>Date</b>	September 20, 2017
<b>Location</b>	DMH SA 8, 2600 Redondo Ave, 6 <sup>th</sup> Fl, Long Beach, CA 90806		<b>Start Time &amp; End Time</b>	2:00 – 4:00 p.m.	
<b>Co-chairs</b>	<b>Co-Chairs:</b> Emily Ramos (Long Beach Adult MHC), Michele Munde (Star View), Courtney Stephens (MHALA)				
<b>DMH Representatives</b>					
<b>SA 8 QI/QA Liaison:</b> Ann Lee	<b>QA Division Lead:</b> Marc Borkheim	<b>Medi-Cal Certification:</b>	<b>Patients Rights Office:</b> Ava Simms		
<b>Members Present by Provider Name</b>					
<b>1736 FCC</b> Carmela Floro	<b>AADAP</b> Hiroko Makiyama	<b>Alafia</b> Paul Ha	<b>Aima Family Services</b> Cyndi Baker	<b>Aspiranet</b> Kim Kopenhaver Colete Chuzel	<b>Bayfront</b> Martin McDermott
<b>California Mentor</b> Glenn Ferdinand	<b>Childnet</b> Anaissa Ibrahim	<b>Children's Bureau</b>	<b>Cil</b>	<b>City of Gardena</b> Jaclyn Coppa	<b>Coastal APIFMHC</b>
<b>Community Representative</b> Jacqueline Glass	<b>Counseling4Kids</b> Kathleen Kim	<b>Crittenton</b>	<b>Didi Hirsch</b> Aminah Ofumbi	<b>Exodus Recovery</b> Cynthia Harbour Trish Burkert	<b>For The Child</b> Pastora Salazar
<b>Harbor-UCLA</b> Lynn Yoon	<b>Harbor View CSC</b> Martha Rivera	<b>HealthView</b> Dexter Jefferson	<b>Heritage Clinic</b> Cynthia Jackson	<b>Long Beach Adult</b> Emily Ramos (co-chair)	<b>Long Beach APIFMHC</b> Julie Leevarinpanich
<b>Long Beach Child &amp; Adol</b> Jeff Baer	<b>Masada Homes</b> Linda Nakamura	<b>MHA</b> Courtney Stephens <i>(new provider co-chair)</i>	<b>MHUCC</b>	<b>Olive Crest</b> Jennifer Mitzner	<b>PACS</b> Kim Phyl
<b>Personal Involvement Center</b> Brittany White	<b>San Pedro MHC</b> Kathleen Villagomez	<b>SB 82 MTT</b>	<b>SFC (South County)</b>	<b>SFC (Torrance)</b> Louis Suncin Della Clayburg	<b>Shields For Families</b> Laurel Fox, Patricia Carrillo Kay Roberson
<b>SSGI/OTTP</b> Debra DeLeon	<b>SSG Alliance</b> Hala Masri	<b>South Bay Children's Health Center</b> Daphne King	<b>South Bay MHC</b>	<b>Star View</b> Michele Munde (co-chair) Mayra Hernandez	<b>Tarzana</b> Lauren Dibbs Karen Wiener
<b>Telecare</b>	<b>Tessie Cleveland</b> Jenny Quach	<b>The Guidance Center</b> Leah Gutierrez	<b>TIES For Families</b>		
<b>Review of Minutes</b>	July minutes are not yet completed. Will be emailed to members upon completion. There was no meeting in August.				
<b>Call to Order &amp; Introductions</b>	The meeting was called to order at 2:00 and attendees introduced themselves.				

**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH  
SA 8 QUALITY IMPROVEMENT/QUALITY ASSURANCE (QI/QA) MEETING  
Minutes, September 20, 2017**

<b>QUALITY IMPROVEMENT (QI)</b>			
<b>Agenda Item &amp; Presenter</b>	<b>Discussion and Findings</b>	<b>Decisions/ and Recommendations Actions/Scheduled Task</b>	<b>Person Responsible/ Due Date</b>
<b>SA 8 Announcement</b>	Please congratulate Courtney Stephens from MHA who was appointed our 2 <sup>nd</sup> Provider co-chair effective 9/11/17. All 3 co-chairs will assist the committee in bringing information relevant to adult and child contract providers, and directly operated providers. Thank you to all those that applied and considered taking on this responsibility.		
<b>Clinical Quality Improvement</b>	<p><b>OMD REPORT:</b></p> <ul style="list-style-type: none"> <li>Updating parameters for medications related to substance use treatment including long-acting naltrexone. Will be posted this week. Reflecting more current terminology, e.g., DSM-5</li> <li>Pharmacy Initiatives continue - developing Pharmacy Benefits Management (PBM) metrics; 3 month summary to show trends - seeing decrease in turnaround time for eligibility verification</li> <li><u>Safety Intelligence:</u> Go-Live communication with ACHSA and Terry Boykins. Email will be sent out. Will be rolled out to contract providers. There will be trainings. Will be a tokenless system.</li> <li><u>QI activities and projects in SA 8:</u> <ul style="list-style-type: none"> <li>San Pedro MHC shared that the clinic is looking at no show rates for intake appointments. Utilizing schedules to see how many scheduled intake appointments were no shows or rescheduled. Brainstorming with staff to get input on how to address and learn reason for no shows. Will keep QIC updated about any findings.</li> <li>Long Beach MHC shared they are experiencing an increase in missed appointments since the move to the current location. The concern is that there are now only 2 buses every 45 minutes which results in reduced participation in groups and attendance to psychiatry appointments.</li> </ul> </li> </ul>		
<b>SA QIC Reports &amp; Countywide Children's Report</b>	<ul style="list-style-type: none"> <li>Presentation on navigating referrals from managed care</li> <li>Prepping for SA3 and 7 EQRO meeting.</li> <li>SA4 Jenn Hallman will be presenting on CTP</li> <li>Collaborative documentation training</li> <li>SA8 introduced Courtney Stephens; will be reviewing MHSIP data for potential QI projects</li> <li>Countywide - Socorro presented on QA systems/QI data use</li> </ul>		
<b>Compliance, Privacy, &amp; Audit Services (CPAS) Bureau – Policies Updates</b>	<ul style="list-style-type: none"> <li>Working on new policies - annual risk assessment, SS Benefit representative payee, use of secure text and video chat messaging</li> <li>Policies update was included in the handouts.</li> </ul>		
<b>Cultural Competence Updates</b>	<p><u>Organizational CC assessment</u></p> <ul style="list-style-type: none"> <li>Focus group with employees (confirmed with HR) and clients; CIOB to develop random sample list. Consultant will use that input to finalize CC tool. Some discussion about CC org assessment.</li> <li>State level ethnic services manager meeting. Each Mind Matters' materials in different languages.               <ul style="list-style-type: none"> <li>EachMindMatters.org.</li> <li>Also targeting suicide prevention posters, brochures, webinars.</li> </ul> </li> </ul>		

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	<ul style="list-style-type: none"> <li>○ Oct 2018 - planning for conference in Riverside</li> <li>○ DACA, unaccompanied minors work - populations in need of services</li> </ul> <p><u>CC annual plan</u> - will be shared once finalized.</p> <ul style="list-style-type: none"> <li>● Highlights will be presented at QIC meetings.</li> <li>● Remember to track annual CC training per Medi-Cal Systems Review. Will be required to attest on annual QA plan. Can use CC 101 links.</li> <li>● Spirituality Parameters presentation by Leticia Ximenez can count towards the annual CC training requirement</li> </ul> <p>Training Division identifies which of their trainings qualify as CC trainings</p>
<p><b>EQRO Review FY 2017-2018</b></p>	<p>EQRO reviewers are requesting clinical providers for the medical component: MD, Nurse Practitioner, and Supervising Psychiatrists, and also a session on Pharmacy Benefits Management (PBM). There will be sessions for Katie A, Clinical and Non-Clinical PIP, Disparities and QIC Chairs/Co-Chairs. No SA District Chief session. For the Disparities session QID will be inviting providers and consumers from each of the five (5) Underserved Cultural Communities (UsCC) programs that implemented the Integrated Service Management model. Interpreters will be provided for the focus group.</p> <p>Finalized draft for new forms that will be coming for the Grievance and Appeal Procedures.</p> <ul style="list-style-type: none"> <li>● Timeline for appealing grievances will be 30 days instead of 45 days. Expedited appeals are now changed from 3 business days to 72 hrs. Expanding to exempt grievances that can be resolved in 24 hours to not require completing a form or logging. Providers should ask the consumer what solution they are seeking.</li> <li>● Moving towards an electronic process for grievance via a public-facing website. Managing security and confidentiality with CIOB, CIO. Will include ability to submit COP information and run data reports.</li> </ul> <p>Notice of Action forms being updated (a lot of changes)</p> <p>Process seems greatly improved. SA 8 is doing well with timely submission of logs. September logs will be due by 10/10/17. Please send to <a href="mailto:DMHCOP@dmh.lacounty.gov">DMHCOP@dmh.lacounty.gov</a> only. Do <u>NOT</u> email or copy the logs to Jose's individual email.</p>
<p><b>Patients' Rights Office Updates</b></p>	<p>SA 8 volunteer callers completed 11 calls in August:</p> <ul style="list-style-type: none"> <li>● 6 Regular hours calls – 2 English (including 1 beneficiary call), 1 Spanish, 1 Spanish crisis call, 1 Khmer, 1 Korean</li> <li>● 5 After hours calls – 3 English (1 of which was a crisis call), 1 Spanish, 1 Korean</li> </ul> <p><i>Thank you to call volunteers!!!</i></p> <p>The next mtg will be held on October 18<sup>th</sup> at the SA 8 Administration office, 2600 Redondo Ave, 6<sup>th</sup> Floor, MultiPurpose Room, Long Beach, CA 90806.</p>
<p><b>Change of Provider Logs Update</b></p>	<p>SA 8 volunteer callers completed 11 calls in August:</p> <ul style="list-style-type: none"> <li>● 6 Regular hours calls – 2 English (including 1 beneficiary call), 1 Spanish, 1 Spanish crisis call, 1 Khmer, 1 Korean</li> <li>● 5 After hours calls – 3 English (1 of which was a crisis call), 1 Spanish, 1 Korean</li> </ul> <p><i>Thank you to call volunteers!!!</i></p> <p>The next mtg will be held on October 18<sup>th</sup> at the SA 8 Administration office, 2600 Redondo Ave, 6<sup>th</sup> Floor, MultiPurpose Room, Long Beach, CA 90806.</p>
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QUALITY ASSURANCE (QA)			
Agenda Item & Presenter	Discussion and Findings	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
<b>Audits &amp; Reviews</b>	<p><u>Auditor Controller</u>: St. Anne's - 9/19</p> <p><u>MR Grant</u>: Contact the Compliance, Privacy, and Audit Services Bureau if issues come up. Exempt employees' time cards need to track actual hours; should match up to IS claims. Legal Entity contract providers require following the auditor's contract and accounting rules. Star View reported that they had an MR Grant audit and had to pay back about \$6,000 due to findings.</p>		
<b>Medi-Cal Certification Section</b>	<p>Quarterly report is in from the State: Los Angeles - 100% Compliance at this point. Fire clearance is really important to be in compliance.</p>		
<b>State DHCS Updates</b>	<p><u>Waivers</u></p> <ul style="list-style-type: none"> <li>• Make sure to share information from QA meeting with staff, especially regarding waivers.</li> <li>• Must have a waiver to provide services. Once a staff reaches 48 hours then must be waived.</li> <li>• Some of your newly hired staff may already have a waiver.</li> <li>• Potential disallowance - can perhaps lose claims provided by staff who should be but are not waived. Really need to get the word out to the right people in your agencies and to other agencies, especially those not regularly attending SA QIC meetings.</li> <li>• Will put out bulletin and add to Organizational Providers' manual</li> <li>• DHCS stance is you can't get a waiver if you've finished accumulating licensing hours</li> </ul>		
<b>Training and Operations</b>	<ul style="list-style-type: none"> <li>• The schedule of trainings and presentations was included in the handouts. Jenn and QA lead will provide training at the SA QIC meetings</li> <li>• QA will provide treatment plan presentations during SA QIC meetings</li> </ul> <p><u>LE Chart Review Updates:</u></p> <ul style="list-style-type: none"> <li>• The Guidance Center – in October</li> <li>• Star View – September 13-15</li> </ul>		
<b>Policy and Technical Development</b>	<p>State Info Notice No 17-040: LACDMH will issue a QA bulletin on interpretation of this notice. QA will advise in a bulletin or revision to the Organizational Provider's manual so do not make any changes until then.</p>		

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	<p>Continue following current policies and procedure. Continue business as usual until notified of the changes. The co-chairs provided a brief summary of the State's requirements:</p> <ul style="list-style-type: none"> <li>• LA requires that the Head of Service is licensed</li> <li>• Registered AMHD needs to be under the supervision of licensed</li> <li>• Risk examples - prior suicide attempts, arrest history, history of drug use, self-harm, etc. - document throughout assessment</li> <li>• Provisional diagnoses do not meet medical necessity - will need to revise this</li> <li>• Assessment does not require medical necessity. Can bill for an assessment up until it is determined that the client does not meet medical necessity.</li> <li>• Will keep 3 year standard for assessments; assessment update practice will stay in place.</li> <li>• Client plan will be effective when required staff signed (draft plans do not count).</li> <li>• Treatment plan requirements will not change.</li> <li>• Plan must be completed before planned services (will still refer to as treatment services)</li> <li>• Significant changes that should trigger a treatment plan update - initial suicide attempt; major life events such as birth of child, loss of job, etc.;</li> <li>• Per State, the following services do not require a treatment plan: TCM for referral and linkage; but TCM for monitoring and following a treatment plan, LA (QA division) will think about possibly setting a higher standard.</li> <li>• Progress note: need to document how interventions help improve client's condition.</li> <li>• Medication consent - okay to provide attestation that medication information reviewed with client</li> <li>• Taking away requirement for co-practitioner signature (LA will put out formal notice; until then follow current guidelines)</li> <li>• Day Treatment - unavoidable absence examples</li> <li>• Two way travel (there and back) are reimbursable</li> <li>• Will issue guidance re: chart review.</li> <li>• No change until QA bulletins are issued</li> </ul> <p>QA Bulletin 17-15: Physician Assistants and Advanced Practice</p>	
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	<p><u>Pharmacists/Clinical Pharmacists Added to A Guide to Procedure Codes</u>          The bulletin is final and included in the handouts.  <u>Drug Medi-Cal for Directly Operated:</u> On hold. Unable to proceed.  <u>QA Contacts for Providers:</u> Please email David Crain  <a href="mailto:dcrain@dmh.lacounty.gov">dcrain@dmh.lacounty.gov</a> with the QA staff that should be contacted for          audits and reviews.</p>		
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Minutes Recorded by:



Ann Lee, Ph.D., SA 8 QI/QA Liaison

Minutes Approved by:



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