

COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH

SA 8 QUALITY ASSURANCE/QUALITY IMPROVEMENT COMMITTEE
MEETING AGENDA

January 17, 2018

2:00 – 4:00 p.m.

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

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

QUALITY IMPROVEMENT (QI) MEETING

2:00-3:00

1.	Welcome/Introductions/Announcement
2.	Clinical Quality Improvement <ul style="list-style-type: none">➤ OMD: Clinical Policy/Parameter Update* (handout from December QI chairs mtg)➤ Clinical Risk Management: Safety Intelligence for LE (see attached instructions)
3.	ACCESS Updates on Referral Issues <ul style="list-style-type: none">➤ ACCESS Center Calls Data CY 2017* (handout from December QI chairs mtg)➤ Access To Care Policy 302.07 - may need to utilize Navigators for help to assist in linking clients to providers with openings.➤ VANS – Update weekly! For SA 8 sites, contact Ann Lee if you need help
4.	Cultural Competence Updates and 2018 Meeting Schedule (see attached)*
5.	Compliance, Privacy, & Audit Services Bureau (CPAS) – Policy Updates*
6.	Patients' Rights Office Updates <ul style="list-style-type: none">➤ Change of Provider Logs – Please use the attached log form (or the one linked in Policy 200.05). Logs are due by the 10th of the following month. Please send directly to DMHCOP@dmh.lacounty.gov only. Do <u>NOT</u> email or copy the logs to Jose's individual email.➤ Notice of Action (NOA)
7.	QID Updates <ul style="list-style-type: none">➤ EQRO Final Report (sent via email 1/16/18)➤ MHSIP Fall 2017 Open Ended Comments Survey
8.	Announcements

*Handouts

Next SA 8 QI Committee Meeting Info:

February 21, 2018

2:00-3:00 p.m.

DMH SA 8 Administration
2600 Redondo Ave, 6th Floor
Long Beach, CA 90806

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MEETING AGENDA

January 17, 2018

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SA 8 QI/QA Liaison: Ann Lee

QUALITY ASSURANCE (QA) MEETING

3:00-4:00 p.m.

1.	Welcome/Introductions/Announcements DMH Reorganization updates
2.	Audits & Reviews – No report
3.	Medi-Cal Certification Section
4.	State DHCS Updates – MFT/PCC Intern Title Changes*
5.	Training and Operations <ul style="list-style-type: none">• Schedule of Trainings and Presentations*• Annual LE QA Report* – Due by January 30th• DO Quarterly Monitoring Report – was due Jan 12th since the 15th was a holiday• SA Lead Updates
6.	Policy and Technical Development <ul style="list-style-type: none">• Clinical Forms Bulletin 17-05: NOA Form Modifications*• QA Bulletin 17-18: NOA-A & NOA-E*• QA Bulletin 17-19: Claiming for Record Review*• QA Bulletin 17-20: MFT/PCC Intern Title Change*• QA Bulletin 17-21: COS Manual Changes*• DRAFT QA Requirements for Directly Operated (anticipating February implementation)• Service Request Log (SRL) Survey
7.	Health Information Management (HIM) Directly Operated ONLY <ul style="list-style-type: none">• Edits in IBHIS to Prevent Duplicate Client IDs• [Secure] email: Don't put PHI in the subject line
8.	Organizational Providers Manual and Procedure Codes Q&A
9.	Upcoming Items <ul style="list-style-type: none">• Therapeutic Foster Care• Review of DMH Policy & Procedures owned by QA

***handouts**

Next SA 8 QA Committee Meeting Info:

February 21, 2018

3:00-4:00 p.m.

DMH SA 8 Administration

2600 Redondo Ave, 6th floor, Long Beach, CA 90806

**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
SA 8 QUALITY IMPROVEMENT/QUALITY ASSURANCE (QI/QA) MEETING
Minutes, January 17, 2018**

Type of Meeting	Service Area 8 Quality Improvement/Quality Assurance (QI/QA) Committee			Date	January 17, 2018
Location	DMH SA 8, 2600 Redondo Ave, 6 th Fl, Long Beach, CA 90806			Start Time & End Time	2:00 – 4:00 p.m.
Co-chairs	Co-Chairs: Emily Ramos (Long Beach Adult MHC), Michele Munde (Star View), Courtney Stephens (MHALA)				
DMH Representatives					
SA 8 QI/QA Liaison: Ann Lee	SA 8 Admin Support:	QI Division Lead:	QA Division Lead:	Medi-Cal Certification:	Patients Rights Office
			Marc Borkheim	Joel Solis	Ava Simms
Members Present by Provider Name					
1736 FCC Camela Floro	AADAP Hiroko Makiyama	Alafia Paul Ha	Alma Family Services Cyndi Baker Lisa Ngo	Aspiranet Kim Kopenhaver Colette Chuzel	Bayfront Martin McDermott
California Mentor Glenn Ferdinand	Childnet Anaissa Ibrahim	Children's Bureau Cristina Nolf	CII	City of Gardena	Coastal APIFMHC Helen Chang
Community Representative Theodore Howlett	Counseling4Kids Julio Cisneros	Crittenton Marcella Briceno	Didi Hirsch Aminah Ofumbi	Exodus Trish Burkert, Cynthia Harbour, Jamie Chess	For The Child Pastora Salazar
Harbor-UCLA	Harbor View CSC Martha Rivera Natalie Asawesna	HealthView Dexter Jefferson	Heritage Clinic Vanessa Bui	Long Beach Adult Emily Ramos (co-chair)	Long Beach APIFMHC Layhearb Poon
Long Beach Child & Adol Jeff Baer	Masada Homes Linda Nakamura	MHA Courtney Stephens (co-chair)	MHUCC	Olive Crest Jennifer Mitzner	PACS Kim Antonio
Personal Involvement Center Brittany White	San Pedro MHC Kathleen Villagomez	SB 82 MTT	SFC (South County) Karen Molano Laila Vicens-Fuste	SFC (Torrance) Della Clayburg	Shields For Families Laurel Fox, Patricia Carrillo, Kay Roberson
SSG/OTTP Debra DeLeon	SSG Alliance Hala Masri	South Bay Children's Health Center Daphne King Angela Wilson	South Bay MHC	Star View Michele Munde (co-chair) Mayra Hernandez	Tarzana
Telecar	Tessie Cleveland Alejandra Ramos	The Guidance Center Elva Gutierrez	TIES For Families		
Review of Minutes	November 2017 minutes are not yet completed. Will be emailed to members upon completion.				
Call to Order & Introductions	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
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QUALITY IMPROVEMENT (QI)			
Agenda Item & Presenter	Discussion and Findings	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
Clinical Quality Improvement – OMD Report	<ul style="list-style-type: none"> • OMD: Clinical Policy/Parameter Update (see handout) • Clinical Risk Management: Safety Intelligence for LE (see instructions in handouts). There was a webinar on Nov 29th. Will be another one tomorrow, Jan 18th from 2-3pm. 	<p>Courtney Stephens will fwd webinar info to Ann Lee to send out to the QIC. Please lookout for the SI webinar info and participate if available.</p>	
Access Updates on Referral Issues	<p><u>ACCESS Center Calls Data CY 2017:</u> See data included in handouts. <u>Access to Care Policy 302.07:</u> Some providers referring clients that are being served and can no longer serve back to the ACCESS appointment line. Please do not refer clients back to the ACCESS center if unable to serve. Providers should appropriately link clients to another provider or contact the SA 8 navigation team if assistance with linkage is needed. LB child & adolescent and Coastal API Family MHC have capacity to take new referrals. SA 8 D.O.s in general have capacity.</p>	<p>SA 8 Navigation team (child, TAY, adult, and older adult navigators) can be contacted at (562) 256-7717 or their direct phone number. See SA 8 contact list included in the handouts.</p>	
Cultural Competency (CC) Update	<p>2017 CCC Workgroup</p> <ul style="list-style-type: none"> • System Transformation Workgroup – focused on ways to incorporate peers into the system of care, identified services that peers could provide, trainings and ways to support (e.g., mentoring, advocacy; help in design of programs and policies) • Physical Disabilities Workgroup – worked on defining physical disabilities and the range of services needed and accessibility to services (e.g., ADA compliance; Communication via assisted technology - apps, ASL isn't only sign language). Will be added to a new Underserved Cultural Communities (UsCC) workgroup. Will meet Jan. 30th. 		

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<p>Compliance, Privacy, & Audit Services Bureau – Policies Update</p>	<p>Compliance Policy 401.03 Clinical Documentation for all payer sources (completed) - effective 11/27/17 (see Bulletin 18-01). Copy of the policy was included in the handouts.</p> <p>Please see the Policy Update list included in the handouts for status on policies being reviewed.</p> <p><u>Change of Provider Database:</u></p> <ul style="list-style-type: none"> • Working on the COP database that will be public-facing. Roll out in two phases: First phase will be DO; second phase LEs. Will be able to enter COP info directly into the database. • Please submit logs by the 10th of the following month to DMHCOP@dmh.lacounty.gov. <p><u>NOA:</u> DHCS reportedly testing translated NOA forms in another county. Will be several months to complete.</p> <ul style="list-style-type: none"> • Use the new English version attached to bulletin. • Continue using the old version for other threshold languages. • NOAs still should be faxed to Patients Rights for LE only. DO gets generated through IBHIS. 	
<p>Patients' Rights Office (PRO) Updates</p>	<p>QID Updates</p> <ul style="list-style-type: none"> • The FY 17-18 EQRO review Final Report was sent to members via email yesterday. • MHSIP Open Ended Comments Survey - aware now that the form doesn't allow for much to be entered in the narrative. Will send out an attachment providers can use. 	
<p>Announcements</p>	<p>The next mtg will be held on February 21st at the SA 8 Administration office, 2600 Redondo Ave, 6th Floor, MultiPurpose Room, Long Beach, CA 90806.</p>	

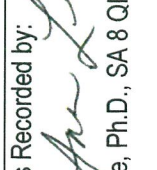
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QUALITY ASSURANCE (QA)			
Agenda Item & Presenter	Discussion and Findings	Decisions/ and Recommendations Actions/Scheduled Task	Person Responsible/ Due Date
Audits & Reviews			
Medi-Cal Certification Section	<p>Certification - Get fire clearance 6 months prior to recertification due date. Joel Solis is the contact for SA 8 provider sites. Certification unit is fully staffed:</p> <ul style="list-style-type: none"> o Iling Wang: SA 1 and SA6 o Mariella Jacobs: SA2 o Renee Lee: SA3 o Stacy Ray: SA4 o Joel Solis: SA 7 & SA8 o As needed: SA5 		
State DHCS Updates	<p>Board of Behavioral Sciences - MFT/PCC Intern title changes – see handout. "Intern" for MFTs is being replaced with "Associate".</p> <ul style="list-style-type: none"> • The documentation training schedule was included in the handouts. • Annual LE Monitoring Reports are due January 30th; Quarterly DO reports were due Jan 12th. LE Form on website (look for January 3rd revision date) <ul style="list-style-type: none"> o QA directed questions about content of Cultural Competency (CC) trainings to the Cultural Competency unit. Please contact Ann Lee (SA 8 liaison) if you have questions about CC trainings for the System Review requirement. • Jan 29 ICC/HBS training focusing on wrap and IFCCS providers 		
Training & Operations			
Policy and Technical Development	<p>Clinical Forms Bulletin 17-05: NOA forms have been modified</p> <ul style="list-style-type: none"> • Add "Client ID", "Provider name", and "Provider ID" fields to the NOA forms in English versions. If you're using the old form for threshold languages, please add the info by hand. • Anticipating more form changes from DHCS • QA Bulletin 17-18: Notice of Action (NOA) Letters A & E - QA is working on getting the NOAs translated QA Bulletin 17-19: Claiming for Record Review <ul style="list-style-type: none"> • Provides common examples of when staff may claim for chart review 	<p>Q&A: Use of 90885 by SFC programs. As a pgm, they do a lot of 90885 as the nature of the work. Will look into and update at next meeting.</p>	Ann Lee

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	<ul style="list-style-type: none"> • No changes to 90885; added chart review to H2010, T1017, and H2011 • State has not identified additional parameters for record review. Discussion about whether this is still a high risk code. Important to clearly document purpose. What about if they aren't mental health records? Okay to review if clinically necessary, doesn't have to be MH records. Could be detention reports, IEPs <p>QA Bulletin 17-20: Marriage and Family Therapist Intern & Professional Clinical Counselor Intern Title Change</p> <ul style="list-style-type: none"> • No changes made in IBHIS for contractors • QA updated the records for all DOs practitioners that are impacted <p>QA Bulletin 17-21: COS Manual Updates</p> <ul style="list-style-type: none"> • Revisions to the COS manual • COS form will be updated soon <p>Drafting Quality Assurance Requirements for DO Programs</p> <ul style="list-style-type: none"> • Anticipating implementation in February; continue current process until requirements are finalized. <p>Service Request Log (SRL) Survey</p> <ul style="list-style-type: none"> • LE providers will receive a survey related where they stand with incorporating fields into the EHR in order to track SRLs. 	
<p>Health Information Management (HIM) –Directly Operated Only</p>	<ul style="list-style-type: none"> • New edits in IBHIS to prevent duplicate client IDs including contractors. • Secure Email DMHHIM@dmh.lacounty.gov if you run up against any duplicate error messages. • Secure/encrypted emails – Do NOT put PHI in the subject line 	
<p>Q&A</p>	<ul style="list-style-type: none"> • Travel time from residence to service location - state language is not very prescriptive/detailed. They don't give the work-home commute subtraction rule you have with mileage 	

Minutes Recorded by: 
Ann Lee, Ph.D., SA 8 QI/QA Liaison

Minutes Approved by: 
Emily Ramos, L.C.S.W., DMH Co-chair