

**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
OFFICE OF ADMINISTRATIVE OPERATIONS – QUALITY IMPROVEMENT DIVISION**

Departmental Quality Improvement Council Meeting

A G E N D A

January 14, 2019

9:00 – 10:30 a.m.

550 S. Vermont Ave., 10th Floor Conference Room

Los Angeles, CA 90020

Sandra Chang Ptasinski, Ph.D., Chair

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| I. | 9:00 - 9:05 | Introductions & Review of Minutes | QIC Members |
| II. | 9:05 – 9:20 | Pharmacy Updates | S. Ka Wai Sou |
| III. | 9:20 – 9:30 | Patients' Rights Office Updates | M. Hernandez |
| IV. | 9:30 – 9:40 | Compliance, Privacy, & Audit Svcs Bureau Policy Updates | R. Faveau |
| V. | 9:40 – 9:50 | Consumer Participation in SA QICs Stipend | G. Hernandez |
| VI | 9:50 - 10:05 | Cultural Competency Updates ➤ CC Organizational Assessment | S. Chang Ptasinski |
| VII | 10:05 – 10:25 | QID Updates ➤ Feedback on potential clinical PIP ideas ➤ EQRO draft report | L. Shonibare |
| | 10:25 – 10:30 | Announcements: | |

Next Meeting

February 11, 2019

**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
QUALITY IMPROVEMENT COUNCIL (QIC) Minutes**

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| Type of Meeting | Departmental Quality Improvement Council | Date: | January 14, 2019 | |
| Place | 550 S. Vermont Ave., 10th Floor Conf. Rm. | Start Time: | 9:00 a.m. | |
| Chair | Sandra Chang Ptasinski, Ph.D. | End Time: | 10:30 a.m. | |
| Members Present | Ann Lee; Angelica Fuentes; Barbara Paradise; Caesar Moreno; Christina Kubojiri; Courtney Stephens; Cynthia Hurtado; Daiya Cunnane; Dara Vines; Debi Berzon-Leitelt; Erica Melbourne; Gassia Ekizian; Gina Haase; Greg Tchakmakjian; Hyun Kyung Lee; Jessica Walters; Kimber Salvaggio; Lisa Harvey; LyNetta Shonibare; Margaret Faye; Maria Gonzalez; Martin Hernandez; Mary Camacho; Michele Munde; Michelle Rittel; Misty Aranoff; Randolph Faveau; Rosa Diaz; Sandra Chang Ptasinski; Socorro Gertmenian; | | | |
| Excused/Absent Members | Alyssa Bray; Cathy Williamson; David Tavlin; Emilia Ramos; Evelyn Lemus; Jerry Sefiane; Leticia Ximenez; Susan Lam; Wendy Rivas; Yen-Jui-Lin | | | |
| Agenda Item & Presenter | Discussion and Findings | Decisions, Recommendations, Actions, & Scheduled Tasks | | Person Responsible |
| Call to Order & Introductions | The meeting was called to order at 9:00 a.m. | QIC members attended this meeting. | | Dr. Chang Ptasinski |
| Review of Minutes | The December minutes were reviewed. | Minutes were reviewed and approved as noted. | | QIC Membership |

| Agenda Item & Presenter | Discussion & Findings | Decisions, Recommendations, Actions, & Scheduled Tasks | Person Responsible |
|---|--|---|--------------------|
| Pharmacy Updates | No report. | | |
| Patients' Rights Office Updates | Mr. Hernandez provided an update on the Grievance and Appeals Forms. PRO continues to make a lot of the modifications recommended by the State per the Final Rule regulations. Also Mr. Hernandez mentioned that this was a joined collaboration with CIOB and QA. | Mr. Hernandez will forward the Medi-Cal Beneficiaries Report to QID once, it becomes available. | M. Hernandez |
| Compliance, Privacy, & Audit Svcs Bureau | Mr. Faveau from Compliance Privacy and Audit Services Bureau provided an update on policies and reviewed the handout. | | R. Faveau |
| Consumer Participation in SA QICs Stipend | Ms. Hernandez provided a brief presentation on Countywide Activity Fund (CAF), Ms. Hernandez stated that it is intended for DMH consumers or family members of DMH to be involved in different meetings throughout the County. \$25 is allotted per meeting for consumers to attend meetings. No more than \$75.00 is permitted per month for the total number of meetings they attend. Consumers can also attend Outreach and Engagement activities which is \$25 dollars for two hours, or \$50 dollars for four hours. Regarding SAAC meetings consumers should attend the Service Area meeting where they reside. If they attend a meeting not pertaining to their residence location, they would not get the stipend. She distributed a handout which indicates the approved meetings for consumers to attend. She also distributed a sample of an invoice submitted by consumers to get the stipend. Invoices are due the 15 th of the following month. For example, if they attend a meeting in December, the invoices are due in January 15 th . The meeting agenda needs to be attached to the invoice. | Ms. Hernandez announced that there will be a meeting on January 17, in SA 6 at West Central Mental Health regarding the homeless count, consumers were invited and approve to participate. The Homelessness Count will take place on January 22, 23, and 24, 2019. If you are interested in attending an orientation, email Ms. Hernandez @ ghernandez@dmh.lacounty.gov | G. Hernandez |

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| Cultural Competency (CC) Updates CC Organizational Assessment | <p>Dr. Chang Ptasiński reminded everyone to complete the on-line Cultural Competence Organizational Assessment Survey. The goal of this survey is to evaluate staff perceptions regarding the Department's responsiveness to the cultural and linguistic competence needs of the communities served by LACDMH. Survey results will reveal knowledge gaps regarding cultural and linguistic competence and this information will be utilized by the Cultural Competency Unit to develop projects and mechanisms to disseminate information. The consultant will be closing the data collection phase in a couple of weeks. Dr. Chang Ptasiński encouraged all QIC members to complete the survey. A total of 1,300 responses have been received thus far. The survey included Open ended questions to capture staff input. For example, the Cultural Competence training topics of interest and skills needed by staff.</p> | | S. Chang Ptasiński |
| CCC Annual Report | <p>Dr. Chang Ptasiński also provided the 2018 Cultural Competence Committee annual report. She mentioned that for 2018 the committee decided to invite guest-speakers on a monthly basis. The members selected the topic and then the CCU coordinated with the identified Bureau/Program to come and present to the CCC for purposes of gathering feedback and recommendations related to service planning, delivery and/or evaluations. See Attached.</p> | | |
| QI Webpage | <p>Additionally, Dr. Chang Ptasiński mentioned that QID is currently being revamped with assistance from CIOB. This webpage includes a revised description of the QI and its processes.</p> | | |

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| <p>QID Updates Feedback on Potential Clinical PIP ideas</p> | <p>LACDMH is actively seeking a new clinical PIP. Dr. Shonibare led QIC members in a discussion of potential clinical PIPs that can be applied system-wide. SA Liaisons were encouraged to facilitate similar discussions during their SA QIC meetings.</p> <p>The following clinical PIP ideas were submitted for consideration:</p> <ul style="list-style-type: none"> • Explore and improve Maternal Mental Health • Increase capacity for SMHS providers (LE and DO) to write holds and concurrently increase access to urgent needs (i.e., more local trainings). • Implement Post service or “compassion calls” especially following an assessment or emotional session. Goal: Increase Treatment adherence and decrease no-shows. • Improve nursing care and reduce delays in communicating needs to the clinic care team (Access and timely care aimed at decreasing relapses and increasing client independence). Potential intervention: Add 24-hour Nurse Call line staffed around the clock with PMH RNs who are ready to assist with client decision making and for health care needs. The call line PMHRNs would connect emergencies directly back to the PES Call team; would add a Nurse’s Note to the client’s chart and further alert the Care Team of the client’s call/concern and plan of care. | | <p>L. Shonibare</p> |
| <p>EQRO Draft Report</p> | <p>LACDMH received the EQRO Draft Report for Fiscal Year (FY) 17-18, on December 26, 2018. The report and feedback grid was forwarded to session participants, including all Departmental QIC members. As instructed by EQRO, QID will submit a compilation of all feedback received by January 16, 2019. The following highlights from the report were discussed:</p> | | |

| Agenda Item & Presenter | Discussion & Findings | Decisions, Recommendations, Actions, & Scheduled Tasks | Person Responsible |
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| EQRO Draft Report Cont. | <ul style="list-style-type: none"> • The percent of High Cost Beneficiaries (HCB; those with approved claims of \$30,000 or more) has increased over the prior two years. More specifically, the percent of HCB among all beneficiaries increased from 2.68% (N=5,390) in Calendar Year (CY) 2015 to 3.52% (21,522) in CY 2016. • The number of psychiatric inpatient admissions increased by 7 Percentage Points (PP) between CY 2015 and CY 2017. • Feedback received from the two consumer focus groups conducted in SA 4 and the one consumer focus group in SA 1; such as: <ul style="list-style-type: none"> ○ Foster parent or step parent participants reported difficulties in gaining access to their dependents' health records. ○ Caregivers reported difficulties with changing therapists; felt interrogated by supervisors and pressured to maintain their therapist. ○ Psychiatric Emergency Teams (PET) are not timely and law enforcement must be contacted as an alternative in SA 1. ○ Additional crisis and urgent services are needed. ○ Palmdale would benefit from additional outreach and education to the Hispanic community. ○ SA 4 Participants were not aware of a warm line. ○ Participants expressed a need for greater communication and means of informing beneficiaries of their eligible services. | | L. Shonibare |

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| EQRO Draft Report Cont. | <ul style="list-style-type: none"> ○ Participants recommended beneficiaries are granted access to phone numbers and resources to address urgent and emergent needs. ○ Encouraged supplemental services, such as periodic check-ins, after a program ends. ● According to the report, regional/SA QIC meetings are “more focused on compliance than on an ongoing or continuous quality improvement (CQI) approach.” ● The MHP’s process of informing and educating beneficiaries regarding wellness centers is not evident. ● The following opportunities for improvement: <ul style="list-style-type: none"> ○ Access to urgent services has declined over the past year ○ Beneficiaries are not uniformly informed of programs or services ○ Few programs and partnerships are aimed at addressing the substance use conditions experienced by 30% of the MHPs population identified with a co-occurring disorder (COD). ● Recommendation to increase the number/percentage of beneficiaries with COD who have integrated or coordinated mental health and substance use services. <p>LACDMH must address each of EQRO’s 23 recommendations during the FY 19-20 review. This is a notable increase from the five recommendations made in FY 17-18.</p> | <p>Dr. Shonibare will submit the following feedback to EQRO, on the QIC members’ behalf: SA QIC meetings are a combination of QI and QA content. Discussions are guided by the QIC members and some questions require a longer time to address than others. As new processes and requirements, such as but not limited to, those associated with revised QA bulletins and the Managed Care Final Rule: Network Adequacy Standards enter the system, more requests for clarification are made during QIC meetings. QI activities and efforts are being regularly discussed during QIC meetings; however, meeting minutes aimed at properly reflecting the QA topic that was accompanied with several questions, may be misread as receiving greater focus. SA QIC meetings are supportive in nature and intended as a forum to facilitate informative discussion regarding both current QA requirements and QI activities.</p> | <p>L. Shonibare</p> |
| Handouts: | Policy/Procedure Update January 14, 2019. | | |

Respectfully Submitted,

Sandra Chang Ptasinski, Ph.D.