



**LACDMH Service Area 7 Administration
Quality Improvement / Quality Assurance Committee**

**December 18, 2018
2:00 to 4:00 p.m.**

1. Welcome/Introductions Caesar Moreno, LCSW

2. Announcements Greg Tchakmakjian Ph.D.

3. **Quality Improvement: 2:00 to 3:00 pm**
 - a. Hospital Discharge Follow-Up: Clinic Complaints Outcomes
 - i. Test Calls Annual Report CY 2017
 - ii. ACCESS Center Updates: Issue with Test call script
 - b. Compliance, Privacy and Audit Services: Policy Updates
 - c. Cultural Competency Updates
 - i. Cultural Competence Training Plan (FY 2018-2019)
 - ii. Tracking of Annual CC Training SA Reports
 - iii. Memo for D.O., L.E. and Administrative Programs
 - d. QI Division Updates: Dr. Daiya Cunnanen, QID
 - i. Fall 2018 Consumer Perception Survey forms received
 - ii. Fall 2017 CPS Data and Open Ended Comments Summary Report
 - iii. Non Clinical PIP (Peer Workgroup and Front Office Customer Satisfaction Training)

4. **Quality Assurance: 3:00 pm to 4:00 pm**
 - a. Medi-Cal Certification Updates Joel Solis, RN
 - b. Training and Operations
 - i. Schedule of Trainings and Presentations
 - ii. Annual QA Report and Written QA Process form for LE's
 - iii. QIC Schedules
 - iv. QA Knowledge Assessment
 - c. Policy and Technical Development
 - i. Final QA Bulletin 18-01: Included ICD 10 Diagnoses
 - ii. Network Adequacy Webinar Update
 - iii. Access to Care FAQs and Ongoing webinar (2nd Tuesday of every month)
 - iv. D.O. QA Check in/Chart Review Schedule 2019
 - v. DHCS State System Review – Chart Review Portion
 - vi. FY 28-19 Reasons for Recoupment

Next Quality Improvement/Quality Assurance Meeting
January 15, 2018 – Back to the Gus Velasco Center, Santa Fe Springs

**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
SERVICE AREA 7
QUALITY IMPROVEMENT COMMITTEE (QIC) Minutes**

Type of Meeting:	SA 7 QIC	Date:	12/18/2018
Place:	Alma Family Services 9101 Whittier Blvd Pico Rivera, CA 90660	Start Time:	2:00 PM
Chairpersons:	Greg Tchakmakjian (Co Chair) Caesar Moreno (Co-Chair) Susan Lam (Co-Chair) Rosa Diaz (Interim Co-Chair)	End Time:	3:00 PM
Members Present:	Greg Tchakmakjian, Susan Lam, Rosa Diaz, Laura Solis, Donetta Jackson, Hsiang-Ling Hsu, Michelle Barajas-Sanchez, Gwen Lo, Wendy Mielke, Joel Solis, Michael Olsen, Nicole Santamaria, Mike Ford, Jennifer Mitzner, Arlene, Irene Juaregui, Priscilla Gonzalez, Javier Nevarez, Annie Choe, Linda Garcia, Quenia Gonzalez, Denise Smith, Anthony Thai		
Agenda Item	Discussion and Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible
Welcome/Introductions	Meeting was called to order at 2:02 PM	Introductions were made and new members welcomed,	Greg Tchakmakjian
Review & Approval of Minutes			

	<p>Fall 2018 Consumer Perception Survey forms Received: More than 15,000 forms were collected. The number was higher than that of the 2017 period. 2,000 refused or were not completed. Service Area 2 turned in the highest amount of surveys, 3,800 in total. 55% of the surveys received were adult surveys. Services area 4 turned in 20% more surveys than the previous year. If you have not sent the open ended comments pages, you are welcome to send them.</p> <p>See Handout for Fall 2017 CPS Data and Open Ended Comments Summary Report</p> <p>Non Clinical PIP Training for Legal entities is currently in the works to be rolled out.</p>	<p>Dr. Daiya Cunnanan</p>
<p>Quality Assurance</p>	<p>Medi-Cal Certification Updates: Currently, we are on target to complete all certifications for Service area 7.</p> <p>Training And Operations: Annual QA Report and Written QA Process form for LE's is due on January 31, 2019.</p> <p>QA Knowledge Assessment: The purpose of these assessments is to improve clinical documentation and see what areas providers need to improve on. DMH is asking providers feedback on whether this is useful. There are discussions in regards to whether the assessment would be done at an individual level, agency level, or anonymous, however, it was noted that if it is done anonymously agencies would not have information regarding areas to improve and work on. Most agreed that assessment at the provider level would be good.</p>	<p>Joel Solis</p> <p>Susan Lam</p>

Susan Lam

Policy and technical Development:

Final QA Bulletin 18-01: Included ICD 10 Diagnoses: Ensure that diagnosis currently being used are DSM V or ICD-10.

Network Adequacy Webinar Update: Please note that there will be a Network Adequacy Webinar every 2nd Tuesday of every month in order to address any upcoming questions regarding the NACT.

D.O. QA Check in/Chart Review Schedule 2019: Information to the state for charts to be audited is due by January 4th through EFT. They will notify you what information will be needed to submit. The list for adult clients to be audited will be out on Friday December 21st. The period of review is January – March 2018.

A Hybrid Review is coming up, no date as to when it will be done yet. This review is related to students and waved clinicians, etc. They will be looking at who their supervisors are and whether they are licensed.

DHC State System Review – Chart Review Portion: See Handout

FY 28-19 Reasons for Recoupment : See Handout

The state is not focusing on client signatures (CTP) however, they want to ensure that you document why client does not sign. Obtaining signatures should continue as usual and attempts to obtain signatures should be made. The state is making emphasis on medical necessity. When documenting, it is important to make sure that dx makes sense and reflects your assessment. In addition, there is emphasis on ensuring that the type of services being provided is well documented in notes (Individual, collateral, etc).

Psychiatric testing codes will change in January 2019.

Adjournment	Meeting was adjourned at : 3:00PM Respectfully Submitted, Rosa Diaz, LCSW SPA 7 QIC Interim Co-Chair	<i>Next Meeting:</i> <i>January 15, 2018</i> <i>Gus Velasco Neighborhood</i> <i>Center, Santa Fe Springs</i>	
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