

*County of Los Angeles – Department of Mental Health  
SA 4 Program Administration*

**Service Area 4  
Child & Adult  
Integrated Quality Improvement Committee**

*June 18, 2019  
10:30am - Noon*

*550 S. Vermont Ave, 10th fl, Conference Room  
Los Angeles, CA 90005*

*🌀 Agenda 🌀*

- ❖ Introductions & Minutes review 10:30 – 10:40am
- ❖ Announcements:

■ **LACDMH QI Updates**

- ▶ Compliance – see handout 10:41 - 11:15am
- ▶ Cultural Competency updates – Multicultural conference on June 18<sup>th</sup>, CC/implicit bias exercise
- ▶ QID updates – Spring/Fall 2018 CPS data, Spring 2019 preliminary data – Jennifer Regan, QID

■ **LACDMH QA Updates**

- ▶ D/O Check-ins schedule has been updated for 2019 11:16 – 12:00pm
- ▶ State DHCS updates
- ▶ NACT & Access to Care update
- ▶ Training Schedule – see handout
- ▶ QA knowledge assessment will roll out July 1<sup>st</sup>, will include 3 questions
- ▶ CANS & PSC-35 updates
- ▶ Payer Error Rate Measurement Audit (PERM) Review
- ▶ DRAFT – Guide to Procedure code revisions
- ▶ DRAFT – Adult Full Assessment revisions
- ▶ Coming soon – New QA website, ICARE update, CAFA update
- ▶ Katie A. Verification form clarifications: Crisis Stabilization vs. Crisis Intervention

■ **Miscellaneous/Questions**

- ▶ Questions/Discussion

**No meeting July 2019. Next meeting will be August 20, 2019**

LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH

SA 4 Quality Improvement Committee (QIC) Meeting Minutes

<b>Type of Meeting:</b>	SA 4 Quality Improvement Committee (QIC)	<b>Date:</b>	June 18, 2019
<b>Place:</b>	550 S. Vermont Ave 10 <sup>th</sup> fl Conference Room Los Angeles, CA. 90005	<b>Start Time:</b>	10:30am
<b>Chair &amp; Co-Chair:</b>	Co-Chair – Christina Kubojiri, LMFT, Children’s Institute Inc; DMH Chair – Anthony V. Allen		
<b>Members Present:</b>	<ul style="list-style-type: none"> <li>• Laura Aquino</li> <li>• Mona Sosa</li> <li>• Lorne Leach</li> <li>• Evelyn Gutierrez</li> <li>• Akila Baskin</li> <li>• Marina Eckart</li> <li>• Sauntrie Abellera</li> <li>• Anthony Allen</li> <li>• Jennifer Regan</li> <li>• Bertrand Levesque</li> <li>• Naomi Arellano</li> <li>• Devanne Hernandez</li> <li>• Erika Frausto</li> <li>• Christen Westberry</li> <li>• Gilbert Morquecho</li> <li>• Dora Escalante</li> <li>• Jessica Estrada</li> <li>• Hyunmi An</li> <li>• Akilah Reynolds</li> <li>• Linda Santiman</li> <li>• Jeannelli Acuna</li> <li>• MaryEllen Braaten</li> <li>• Lisa Harvey</li> <li>• Eton Vogt</li> <li>• Sandra Long</li> <li>• Linda Kaye</li> <li>• Adriana Gamez</li> <li>• Jenna Ritsema</li> <li>• Ashton Hasson</li> <li>• Jessica Montemayor</li> <li>• Jennifer McKirdy-Corletto</li> <li>• Mayra Hernandez</li> <li>• Christina Kubojiri</li> <li>• Elizabeth Mour</li> <li>• Reza Khosrowabadi</li> <li>• Alma Guevara</li> <li>• Erica Lara</li> <li>• Alexis Orens</li> <li>• Jonathan Figueroa</li> </ul>		
<b>Members Absent:</b>	<ul style="list-style-type: none"> <li>• AIDS project LA</li> <li>• Alma Family Services</li> <li>• Anne Sippi Clinic</li> <li>• Asian Pacific Counseling</li> <li>• Child Family Guidance Center</li> <li>• CA Hispanic Commission-CHCADA</li> <li>• Children’s Hospital</li> <li>• Dignity Health</li> <li>• DMH AOT</li> <li>• DMH ASOC</li> <li>• DMH TAY</li> <li>• DMH CHEERD</li> <li>• DMH PSB</li> <li>• DMH SFC</li> <li>• DMH PRO</li> <li>• DMH VALOR</li> <li>• Filipino American Services Group</li> <li>• Gateways Community Mental Health</li> <li>• Gateways Percy Village</li> <li>• Health Research Association USC</li> <li>• Hollywood Mental Health</li> <li>• LAMP Community</li> <li>• JWCH Institute</li> <li>• Pacific Clinics</li> <li>• People Concern, The</li> <li>• Saban Free Clinic</li> <li>• SSG Alliance</li> <li>• SRMT</li> <li>• SSG Silver</li> <li>• Step up on Second</li> <li>• Travelers Aid Society of LA</li> <li>• United American Indian Involvement</li> </ul>		
<b>Introductions:</b>	Members present introduced themselves.		
<b>Minutes Approval:</b>	No revisions indicated for <del>June</del> <sup>May</sup> 2019 QIC minutes.		
<b>Announcements:</b>			





Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, Scheduled Tasks	Responsible Person / Due Date
<p><b>QA Updates</b> Christina Kubojiri</p>	<p><u>Quality Assurance Updates:</u></p> <ul style="list-style-type: none"> <li>• <b>D/O check-ins schedule has been updated for 2019.</b> No longer doing 3 monthly D/O check-ins due to DMH QA staff availability. Only 2 per month moving forward. Schedule to be provided by Jennifer Hallman.</li> <li>• <b>State DHCS updates:</b> <ul style="list-style-type: none"> <li>○ The info notice is out dated May 31, 2019 19-026. “No surprises” to DMH in notice. MHP needs policies related to info notice by August 1<sup>st</sup> (DMH QA). A DMH QA bulletin will come out about the info notice.</li> </ul> </li> <li>• <b>Training/Operations update:</b> <ul style="list-style-type: none"> <li>○ Trainings scheduled and provided through 2019.</li> <li>○ Documentation training revised for July 18. Was the 16<sup>th</sup>. New bulletin to post later this week. Email Wanta Yu for link to register now if can’t wait for bulletin.</li> </ul> </li> <li>• <b>QA knowledge Assessment</b> is almost ready to roll out the pilot. Only 3 questions this round.</li> <li>• <b>Policy updates:</b> <ul style="list-style-type: none"> <li>○ NACT submission to the State upcoming July 1<sup>st</sup> <ul style="list-style-type: none"> <li>▪ LAC DMH is requesting all NACT updates to be completed by June 20. Along with Access to Care data (SRL) <ul style="list-style-type: none"> <li>• D/O – if SRL is up to date in EHR all is completed.</li> <li>• Contract providers – if EHR is equipped to provide DMH SRL data prepare to send. All others need to complete excel spreadsheet and Howard Washington will review and work on compiling 1 large spreadsheet to send the State.</li> <li>• Everyone needs to check data entry for accuracy. Only capturing 65% of county right now. DMH QA will reach out to providers not completing NACT.</li> <li>• A QIC member requested a full list of all providers per service area to ensure all are attending their SA QIC meetings as required.</li> <li>• Ensure all prior entered practitioners/staff have been updated to include the added fields in NACT.</li> </ul> </li> </ul> </li> <li>○ NACT 2.0 version to come out soon will allow delineation of NACT data for a practitioner among multiple sites. For now data applies to a person’s work at all sites.</li> </ul> </li> <li>• <b>CANS-IP &amp; PSC-35 updates</b> <ul style="list-style-type: none"> <li>○ CANS applies to everyone 6-21 year olds <ul style="list-style-type: none"> <li>▪ Crisis stabilization excluded</li> </ul> </li> </ul> </li> </ul>		



Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, Scheduled Tasks	Responsible Person / Due Date
<p><b>QA Updates</b> Christina Kubojiri</p>	<ul style="list-style-type: none"> <li> <ul style="list-style-type: none"> <li>▪ Will not be translated since consumers are not completing this themselves, practitioners are.</li> </ul> </li> <li>○ PSC-35 applies to 3-19 year olds           <ul style="list-style-type: none"> <li>▪ PSC will be translated to threshold languages since caregivers/clts would complete this themselves (1-2 months)               <ul style="list-style-type: none"> <li>• Until translated for LA county, other languages can be found at Massachusetts General. Jen Hallman says the English LAC DMH version should be attached with the Mass General one if completed in another language and form was obtained by this source.</li> </ul> </li> </ul> </li> <li>○ DMH CANS in-person overview trainings are full, but only for people moving on to train-the-trainer. Other practitioners should take online training and then certify through PRAED.           <ul style="list-style-type: none"> <li>▪ DMH is picking up the cost of the certification exams. Instructions will be provided this week via email most likely</li> <li>▪ Talk of a standardized sign-in sheet that would be sent to PRAED to confirm who needs a code to take certification test.</li> </ul> </li> <li>○ CANS-IP and PSC-35 claiming will be done in direct services through subsuming through other service (kind of like how treatment planning can be claimed)           <ul style="list-style-type: none"> <li>▪ Ex: If individual therapy occurs at 6 months – can add onto this note the update to CANS for 6 mos requirement. Can claim through CFT meetings in ICC service, etc...</li> </ul> </li> <li>○ There are discussions about FSP &amp; CalWORKS related to CANS to try to streamline the process, but for now there are no changes to outcome measures or requirements.</li> <li>○ Question about what to do if client “ages out” → is a discharge CANS completed? Jen asked the state this question already and they said to continue the CANS through the length of treatment, but LAC DMH is clarifying this further. May call it something other than “discharge”, but more to come on this.</li> <li>○ There will be a 2 month window prior and after when CANS are due.</li> <li>○ Question: Does CANS have to be completed face-to-face? Jen said not necessarily</li> <li>○ Sharing of CANS discussed – EPSDT application will show all contract providers who have entered CANS for a client and they can see other entries except for D/O initially. D/O will be available for viewing in EPSDT sometime after July 1<sup>st</sup>. Will not be able to view DCFS in application. Jen Hallman has communicated to all SFC the need to share CANS and provide with referrals.           <ul style="list-style-type: none"> <li>▪ When receiving a “baseline” prior CANS, providers still want to conduct their own CANS as you will be entering scores into EPSDT application as yourself as the responsible party who completed the CANS update.</li> </ul> </li> </ul>		

Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, Scheduled Tasks	Responsible Person / Due Date
<p><b>QA Updates</b> Christina Kubojiri</p>	<ul style="list-style-type: none"> <li>• <b>DRAFT Assessment form updates:</b> <ul style="list-style-type: none"> <li>○ Draft AFA provided to QIC members. Content remains the same. Some changes include: <ul style="list-style-type: none"> <li>▪ Reason for referral is combined with the current symptoms box</li> <li>▪ Strengths was moved to the end before clinical summary as often times strengths are gained throughout assessment and clearer near end of assessment. It also helps with the clinical formulation</li> <li>▪ MSE was expanded to include check boxes due to requests. Forms are D/O required, but contract providers can adapt form to not include check boxes if they wish, but still contain required elements. Each section on check boxes of MSE still has a small comment area. Some members were concerned about check boxes taking away the individualization and expansion of information in assessments</li> <li>▪ Substance area includes further explanations</li> <li>▪ Clinical formulation – added better descriptor of what info should be included here</li> <li>▪ A recommendation was made to add a “family involvement requested” area since this is important to note when working with adults. <ul style="list-style-type: none"> <li>▪ All assessment forms will be Arial font</li> <li>▪ May be finalized by July 1st</li> </ul> </li> </ul> </li> <li>○ Still updating CAFA and ICARE (will not be ready by July 1<sup>st</sup>)</li> <li>○ D/O – may be adding required info for D/O staff to disposition/recommendation section to include the “next appointment date” in order to meet timeliness state requirement data <ul style="list-style-type: none"> <li>▪ This is also required of Contract providers, but how you capture info is up to them</li> </ul> </li> </ul> </li> <li>• <b>PERM review</b> – 140 requests made by CMS <ul style="list-style-type: none"> <li>○ All contacted by DMH. 80 received so far, but due dates are scattered out to June 19 depending on what request was received by the State.</li> </ul> </li> <li>• <b>DRAFT Guide to Procedure Code updates:</b> <ul style="list-style-type: none"> <li>○ Reformatted the visual of the guide to be portrait instead of landscape.</li> <li>○ Removed reference to fee-for-service (network) as it was confusing people</li> <li>○ First descriptive pages were revised</li> <li>○ Pg 8 clarification related to doctors</li> <li>○ Brad and Jen are talking about whether providers will be given any period of time in order to implement guide to procedure code changes once they become effective.</li> </ul> </li> <li>• <b>DMH QA bulletin will come out for the recently signed policy on opening/closing episodes</b></li> <li>• <b>Katie A form clarification:</b> <ul style="list-style-type: none"> <li>○ Definition of Katie A comes from the State and not DMH</li> </ul> </li> </ul>		

Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, Scheduled Tasks	Responsible Person / Due Date
<p><b>QA Updates</b> Christina Kubojiri</p> <p><b>QA Updates</b> Bertrand Levesque</p>	<ul style="list-style-type: none"> <li>○ People are using crisis stabilization for clients for just being in an intensive program like FSP or IFCCS. Crisis stabilization on this form is for specific stabilization programs where special certification has been obtained. Crisis intervention applies more to the use of the procedure code.</li>   <li>• Question about when TCM objective is not needed on CTP: TCM objective is not needed when still within 60 days from admit and clinician's disposition from initial assessment is to refer/link client out and not provide on-going treatment. When there was no follow thru on this linkage and clinician/staff needs to follow up and continue work on linkage/referral, a TCM objective is now needed.</li> </ul>		



Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, Scheduled Tasks	Responsible Person / Due Date

**Next Meeting:** August 20, 2019; 695 S. Vermont Ave, Los Angeles, CA 90005, 15<sup>th</sup> Fl, Conference Room (*July is dark*)

Respectfully Submitted



Christina Kubojiri, LMFT - QA Supervisor, Children's Institute, Inc.  
SA4 Co-Chair