

COUNTY OF LOS ANGELES-DEPARTMENT OF MENTAL HEALTH
Program Support Bureau-MHSA Implementation & Outcomes Division

SUMMARY FOR:

Group Cognitive Behavioral Therapy Learning Network
September 13, 2012, 2:00PM – 4:00PM

Location:

695 S Vermont Ave, 15th floor
Large Conference Room
Los Angeles, CA 90005

Facilitator:

Michael Villaescusa, LCSW, PSW-II

Participants:

Sabrina Barscheski, Santa Clarita Valley MHC
Helen Chang, Coastal API Family MHC
Josh Cornell, MHSA Implementation & Outcomes Division
George Eckart, MHSA Implementation & Outcomes Division
Aurora Farias, Harbor UCLA
Rosalie Finer, ASOC
Marcie Gibbs, Downtown MHC
Esther Gobrial, Didi Hirsch
Lee Gomberg, Long Beach Adult MHS
Nicole Gutman, Downtown MHC
Joanna May, Edelman

Nuri Merino Jacquez, Arcadia MHC
Etsuko Nagatani, Antelope Valley MHC
Bob Orkin, San Pedro,
Urmi Patel, ASOC
Keri Pesanti, MHSA Implementation & Outcomes Division
Jeong Min Rhee, Coastal API Family MHC
Lucian Song, Edelman Westside MHC
Toya Swan, West LA SA 5 Admin
Kara Taguchi, MHSA Implementation & Outcomes Division
Sherrie Yu, Didi Hirsch

- I. Updates since previous PPLN
 - Action item follow-up from previous meeting
 - Hot tips or new strategies that are being utilized to integrate outcomes into clinical practice

M. Villaescusa requested suggestions for agenda items to discuss. Issues/concerns were collected and addressed throughout the meeting. Tips and strategies were also discussed throughout the meeting. Please see sections II and III for more details.

- II. Review of Reports
 - Update on progress of data reporting
 - Review of available reports
 - How is data being shared with clinical staff and clients?
 - How is the data being utilized?
 - What data/information may be helpful in future meetings?

Reviewed reports provided at first Learning Network including: Unique Client Count by Primary Language, Countywide Demographic, Detailed by LE, Core versus Non-core Services, Expenditures by PEI Plan, Matched Pairs, Unable to Collect (UCS), Countywide Aggregate Practice Outcomes Dashboard.

From review of reports emerged: Aggregate report showed "Other" as most common diagnosis, generating interest in what "other" diagnosis include; clients reluctance to enter group treatment and strategies for addressing reluctance; interest in secondary diagnosis data as providers notice heterogeneity of diagnoses among clients; data showing clients with severe diagnoses receiving PEI EBPs led to discussing which clients are appropriate for PEI services; benefits/drawbacks of closed versus open groups and how data may assist in determining which format to adopt; wide range of treatment length led to discussing fidelity to the model's treatment length parameters being challenging as clinicians notice psycho education with clients tends to take longer than model states, clients' psychosocial factors impact on treatment, and limited space at agencies forces some agencies to shorten length of sessions from 2 to 1.5 hrs.

Agency shared utilizing data to inform treatment by starting bi-weekly "in-house" learning networks.

III. Open Forum

Discussion topics included: what are the appropriate billing codes for Group CBT with clarification that the vast majority of PEI services should be billed to a specific EBP except during intake phase if EBP is not yet determined, with unknown EBP the appropriate bill code; can clients be in Group CBT longer than the number of sessions suggested in the treatment model; can clients who received services at the agency prior to transformation receive PEI EBPs with clarification that clients receiving services prior to transformation can receive PEI services as long as they are appropriate for PEI; how much training does a clinician need in order to bill PEI Group CBT; is further consultation available after phone consultations are done; how do we request more treatment manuals; will DMH provide more Group CBT trainings; informed group of training required for a clinician to bill to PEI Group CBT.

IV. Next PPLN Meeting

Time/location TBD