

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

**September 17, 2019
2:00 to 4:00 p.m.**

1. Welcome/Introductions Caesar Moreno, LCSW
2. Review of July 2019 minutes Caesar Moreno, LCSW
3. **Quality Improvement: 2:00 to 3:00 pm** Daiya Cunnane, PsyD
 - a. Patient's Rights Updates
 - b. ACCESS Center Updates
 - c. Cultural Competency Updates
 - d. QI Division Updates:
 - i. Spring and Fall 2018 CPS Provider-level data
 - ii. Customer Service Workshop for Contractors
 - iii. QI Input: Field Based Surveys and QI Work Plan in QIC Meetings
4. **Quality Assurance: 3:00 pm to 4:00 pm**
 - a. New QA Website (Handout)
 - b. MR Grants or Audits (Notifications)
 - c. Training and Operations
 - i. Schedule of Trainings and Presentations (Handout)
 - ii. QA Knowledge Assessment
 - d. Policy and Technical Development
 - i. DO IBHIS Documentation Trainings
 - ii. NACT Webinars on Monthly Basis
 - iii. QA Bulletin 19-04: New Guide to Procedure Codes
 - iv. CANS Training Reminder (Handout)
 - v. Co-Practitioner Claiming (Directly Operated)
 - vi. Continuity of Care

Next Quality Improvement/Quality Assurance Meeting
October 2019 Meeting - Cancelled

Greg Tchakmakjian Ph.D.- Chair	(213) 639-6733	gtchakmakjian@dmh.lacounty.gov
Caesar Moreno, LCSW – Co Chair	(562) 692-0383 x 236	cmoreno@thewholechild.org
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**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
SERVICE AREA 7
QUALITY IMPROVEMENT COMMITTEE (QIC) Minutes**

Type of Meeting:	SA 7 QIC	Date:	September 17, 2019	
Place:	Gus Velasco Neighborhood Center 9255 S. Pioneer Boulevard Santa Fe Springs, California 90670	Start Time:	2:10 PM	
Chairpersons:	Greg Tchakmakjian, Chair (Absent) Susan Lam, Co-Chair Caesar Moreno, Co-Chair	End Time:	3:30 PM	
Members Present:	Violeta Kim, Laura Solis, Donetta Jackson, Hsiang-Ling Hsu, Cara Jenson, Audrey Fisher Price, Wendy Mielke, Michael Olsen, Natalie Gowern, Jenny Silver, Chloe Gomez, Cheyla Bellamy, Jennifer Mitzner, Elizabeth Hernandez, Arlene Contreras, Irene Juaregui, Cinthia Sanchez, Marcel Mendoza, Robin Washington, Javier Nevarez, Michelle Bilotta Smith, Cynthia Juarez, Linda Garcia, Gloria Guevara, Quenia Gonzalez, Denice Palacios, Anthony Thai, Amanda Montelongo.			
Agenda Item	Discussion and Findings		Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible
Welcome/Introductions	Meeting was called to order at 2:10 PM		Introductions were made and new members welcomed,	Caesar Moreno
Chair Updates				
Review & Approval of Minutes	Minutes from August 2019 were reviewed		Minutes were approved by: Elizabeth Hernandez Tatiana Rojas	Caesar Moreno
Quality Improvement	<i>Patients' Rights Update</i> <u>Change of Provider log:</u> Patients Rights office is still working on establishing the online portal for grievances and Change of Provider forms. The plan is to roll out online entry of the Change of Provider forms to Contractors. Patients Rights is working on getting contacts for agency liasons through Terry Boykin's office. Patients Rights office will create trainings to walk Contractors through the online system. A webinar based training will not occur as they believe live training is better. A token, or C-number, will be needed to enter into the system. Trainings may occur in November – this is based on how many contractor contacts			Caesar Moreno Susan Lam

<p>Quality Improvement (continued)</p>	<p>are received and how soon get them back. Information should go out soon.</p> <p>Question: <i>How many will be able to access the system?</i> There may be 3 or more per LE depending on who the agencies want to be responsible. There could also be 3 per program. Nothing has been established as of yet since Patients Rights office will need to determine how many licenses for entry are needed which may reduce the number of people who can access the system. More information on the online system will be going out with more instructions and clarification</p> <p><i>Cultural Competency</i></p> <p>The Cultural Competency unit is currently busy with getting things ready for the upcoming EQRO review which includes review of the overall cultural competence plan. The Cultural Competence plan will be reviewed at future SPA QIC meetings.</p> <p>The Cultural Competency unit is also “revamping” the overall charter for membership committee participation, leadership responsibilities, and meeting schedules.</p> <p>If anyone has questions about committee participation, they can contact :</p> <ul style="list-style-type: none"> • Sandra Chang Ptasinski SChang@dmh.lacounty.gov <p><i>Policy Updates</i></p> <p>Handout was provided with policy updates.</p> <p><i>QI Division – Other Updates</i></p> <p><u>ACCESS Center Update</u></p> <p>The ACCESS Center is continuing to create a list of those [providers who have reported not taking clients at this time. There are currently about 20 clinics on that list which has</p>	<p>Handout provided for review.</p>	<p>Susan Lam Caesar Moreno</p> <p>Caesar Moreno Susan Lam</p>
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	<p>been disseminated to various DMH offices. ACCESS is not sending client referrals to the clinics who say not taking clients, but some clients talk about other agencies saying not taking clients when they are referred. If agencies want to be taken off the "list" contact ACCESS Center.</p> <p>Question: How does ACCESS know about agencies not taking clients? ACCESS will provide a referral for prospective clients to agencies for services, Clients are then calling ACCESS back and providing feedback that the agency is no longer taking clients and then seeking other referrals. ACCESS is then indicating that they were not informed of this and placing agency on the list. Those agencies on the list will receive periodic follow-up to identify when taking clients.</p> <p>5150 Form: It was indicated that there is a new 5150 form to be used. Please check DMH website.</p> <p>Consumer Perception Surveys QI Division is currently re-evaluating the Consumer Perception Survey process. Some aspects that they are looking at include: How can make changes to gain increasing numbers? Open up survey to all field-based providers? Continue to do random sampling? Make surveys available to all age groups and not make it age specific. Need to look at: motivating low motivated agencies to participate, Is the current survey relevant to field based and can the form be abbreviated to only meaningful questions.</p> <p>DMH is looking at developing a survey to get information from QA contacts.</p> <p>Some feedback raised by the group include: Surveys length take a long time, every 6 months is too often and 1 time a year might be better, random sampling seems to not be so random, the surveys do not lend themselves to be anonymous since IBHS ID & DOB are on the forms, what purpose do the surveys actually serve?</p>		<p>Susan Lam Caesar Moreno</p>
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Quality Assurance	<p><u>New QA Website</u></p> <p>Instructions were provided to the group regarding access to the new website.</p> <p><i>Medi-Cal Certification</i> - No updates at this time</p> <p><i>MR Grants or Audits</i> (Notifications) - None reported</p> <p><i>State DHCS – Updates</i></p> <p><u>DHCS Audits of NACT Data</u></p> <p>A Network Adequacy update was emailed to the collaborative. It indicated that 10 counties have been sanctioned for providing inaccurate data on the NACT including incorrect data for FTE's in agency. Reports have indicated that FTE's providing direct service hours to clients are showing as having low to no client caseload This is especially true of supervisors. If an FTE (40hours) is providing direct service hours, he/she should indicate a caseload of greather than 10.clients/beneficiaries.This information is also attributed to caseload assignmetn by the supervisor.The State is looking very closely at the supervisors with full (40 hours) and maximum number of clients/beneficiaries are not corresponding to the FTE. Some agencies have been notifed to make corrections to their data.The providers can resubmit NACT data to reflect accurate information. Statte will require that CEO's attest for the accuracy of the NACT data.</p> <p><u>QA Knowledge Assessment</u></p> <p>QA Division will be sending out the answer key this week, but will not have the results table ready just yet.</p>	Handouts provided.	Susan Lam
			Susan Lam

<p>Quality Assurance (continued)</p>	<p>not being able to document any of it. It sounds like much or work is basic SA services of referring and linking/education.</p> <p>QA Division continues to note that if documentation sounds like substance use services were only service provided, then the note is not billable. But if you are connecting mental health with SA (and not sound like a 100% SA note), then it can be billable.</p> <p><u>CANS IP and PSC-35 Forms</u></p> <p>A handout regarding the CANS was provided. The previous code to defer the cost has been changed. Please see the new cost code within the instructions. If have questions, contact David Crain (dcrain@dmh.lacounty.gov) if have questions.</p> <p>QA Division is looking at other issues with the CANS including: Adding another category to the OMA application for single or one time only,</p> <p><u>Directly-Operated and Co-Practitioners</u></p> <p>Directly Operated staff can now claim for co-practitioners and write separate notes. If have questions, please speak with the clinic director.</p> <p><u>Continuity of Care</u></p> <p>Under the final rule, if someone had been seeing a private therapist, then got medi-cal and want to remain with that therapist, they have a right to stay under continuity of care.</p> <p><i>Other Announcements:</i> None</p>		<p>Susan Lam</p>
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Adjournment	Meeting was adjourned at 3:30 pm Respectfully Submitted, Caesar Moreno, LCSW SPA 7 QIC Chair	Next Meeting: November 19, 2019 Alma Family Services Pico Rivera, California	
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