



**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH  
QUALITY, OUTCOMES & TRAINING DIVISION**

Departmental Quality Improvement Council (QIC) Meeting

AGENDA

April 13, 2020

9:00 A.M. – 10:30 A.M.

Skype Meeting

Kalene Gilbert, L.C.S.W, Chair

I.	9:00 – 9:05	Introductions and review of minutes <ul style="list-style-type: none"> <li>• QI Staff Announcements</li> </ul>	QIC members K. Gilbert
II.	9:05 – 9:20	Cultural Competency Updates <ul style="list-style-type: none"> <li>• Cultural Intelligence Campaign Launch</li> <li>• Cultural Competency-related Policy &amp; Procedures</li> </ul>	S. Chang
III.	9:20 – 9:35	ACCESS Center Updates <ul style="list-style-type: none"> <li>• Clinics NOT Accepting Referrals</li> </ul>	N. Kasarabada
IV.	9:35 – 9:50	Compliance, Privacy, and Audit Services Updates <ul style="list-style-type: none"> <li>• Administrative Policy Committee</li> <li>• DMH Desktop link to the Internal Portal for Policy and Procedure</li> </ul>	H. Ditko R. Faveau
V.	9:50 – 10:20	Quality Improvement Updates <ul style="list-style-type: none"> <li>• CPS Data Reporting</li> <li>• Spring 2020 CPS</li> <li>• Future Meeting Structure</li> </ul>	K. Gilbert D. Cunnane
VI.	10:20 – 10:30	Announcements	QIC members

Next Meeting: Monday, April 13, 2020 at 9:00 AM

LOS ANGELES COUNTY (LAC) DEPARTMENT OF MENTAL HEALTH (DMH)  
QUALITY, OUTCOMES, AND TRAINING DIVISION (QOT)

DEPARTMENTAL QUALITY IMPROVEMENT COUNCIL (QIC)

MEETING MINUTES  
March 2020

<b>Type of meeting:</b>	Departmental QIC Meeting	<b>Date:</b>	March 16, 2020
<b>Location:</b>	550 S. Vermont Avenue 10 <sup>th</sup> Floor Conference Room Los Angeles, CA 90020	<b>Start time:</b>	9:00 AM
		<b>End time:</b>	10:30 AM
<b>Members Present:</b>	Angelica Fuentes; Barbara Paradise; Courtney Stephens; Daiya Cunnane; Dara Vines; David Cochran; Debi Berzon-Leitelt; Erica Melbourne; Gassia Ekizian; Greg Tchakmakjian; Helena Ditko; Hyun Kyung Lee; Jeff Johnson; Kalene Gilbert; Kimber Salvaggio; Kristin Gray; Lisa Harvey; Lisa Thigpen; Margaret Faye; Marilyn Torres; Michele Munde; Michelle Rittel; Misty Aronoff; Naga Kasarabada; Randolph Faveau; Rose Hendricks; Sandra Chang; and Susan Lam.		
<b>Excused/Absent Members:</b>	Alyssa Bray; Ann Lee; Anthony Allen; Caesar Moreno; Cathy Williamson; Christina Kubojiri; David Tavlin; Debbie Innes-Gomberg; Doris Benosa; Emilia Ramos; Jennifer Regan; Jessica Walters; Leticia Ximenez; LyNetta Shonibare; Martin Hernandez; Rosalba Trias-Ruiz; and Socorro Gertmenian		
<b>Agenda Item</b>	<b>Discussion and Findings</b>	<b>Decisions, Recommendations, Actions, and/or Scheduled Tasks</b>	<b>Person(s) Responsible</b>
<b>1. Introductions and Review of Minutes</b>	<p>The meeting was called to order at 9:08 A.M. QI staff status was announced.</p> <p>The February 2020 minutes was reviewed and the following correction was requested:</p> <p>1) Under Compliance, Privacy, and Audit Services Updates, Randy Faveau is the contact person for policy updates.</p> <p>The Department of Public Health's website is a good source of information about the Coronavirus outbreak: <a href="http://publichealth.lacounty.gov/media/coronavirus">publichealth.lacounty.gov/media/coronavirus</a></p>	<p>Meeting minutes were reviewed and approved with the exception of the requested correction.</p>	<p><i>K. Gilbert</i></p> <p><i>QIC Membership</i></p> <p><i>K. Gilbert</i></p>
<b>2. Cultural Competency Updates</b>	<p>The Cultural Intelligence Campaign Launch took place on Wednesday, January 29, 2020 at the Martin Luther King, Jr. Outpatient Center.</p> <p>The pilot project was a collaboration between three county departments focusing on cultural intelligence. The staff who participated provided an overall positive evaluation of their experience.</p>		<i>S. Chang</i>

	<p>The Cultural Competency Unit (CCU) has developed a <i>Cultural Competence Policies &amp; Procedures At A Glance</i> reference which summarizes general procedural steps for interpreter and translation services including a list of vendors.</p>	<p>Laminated copies will be made available soon as well as an electronic copy via CCU's webpage.</p>	
<p><b>3. ACCESS Center Updates</b></p>	<p>The list of <i>Clinics NOT Accepting Referrals</i> is an ongoing list that is maintained at all times and is shared with Service Area (SA) Contracts Chiefs and Deputy Directors, SA Navigators, and QIC Chairs and Co-Chairs who then share the list with providers at their SA QIC meetings. ACCESS Center updates this information when they get notified by providers that they are "Accepting Referrals". Currently, since the Provider Directory does not provide this information, ACCESS maintains this list to ensure callers are provided with accurate referral information.</p>	<p>Contract providers who continue to not accept referrals for a long period of time will be monitored in relation to the reasons for non-acceptance. Kalene mentioned about the Access to Care leadership committee/workgroup that will focus on such issues. All providers are to update the Network Adequacy Solution (NAS) with accurate information regarding "Accepting referrals".</p>	<p><i>N. Kasarabada</i></p>
<p><b>4. Compliance, Privacy, and Audit Services Updates</b></p>	<p>Policy 201.04, Disclosure of Licensee Probation Status to Clients, is a new policy that ensures clients are advised of their physician's probation status; a client consent form, Disclosure of Physician Probation Status, is to be completed by the licensed clinician and signed by the client as receipt. Policy 553.01, Privacy and Security Awareness Training, and Policy 553.02, Privacy and Security Compliance Program, has been revised.</p> <p>An icon link to the DMH Policies and Procedures portal has been made available on all County desktops; the logo is the county seal and will take users directly to the Internal Policy Portal where all DMH policies can be accessed.</p> <p>The first Administrative Policy Committee (APC) meeting, a counterpart to the Clinical Policy Committee (CPC), is scheduled on Wednesday, March 11, 2020. Both committees will be charged with the review of all policies for the Department</p>		<p><i>R. Faveau</i></p> <p><i>H. Ditko</i></p>

	<p>to assist with continuity, verifying authorities, and language update; the goal is to ensure DMH operational effectiveness, increase efficiency, and compliance with federal, state and county regulations.</p> <p>The procedural steps for Policy 106.17, Policy Development, Review, Approval, and Distribution, was reviewed. In addition, clinical policies are subject to review by the Office of Discipline Chiefs who then appoints the CPC as an ad hoc workgroup for follow-up.</p> <p>Effective Wednesday, July 1, 2020, the Board of Behavioral Sciences is requiring clinicians to provide their clients notice on how to file a complaint with their respective agency.</p> <p>A copy of Policy 1100.01, Quality Improvement Program, was provided to the QIC members for their review.</p>	<p>The notice providing details of the requirement was provided to the QIC members to share with their providers.</p> <p>Feedback and input are welcome at the next QIC meeting as the policy is on the list to be updated.</p>	<p><i>K. Gilbert</i></p>
<p><b>5. Quality Improvement Updates</b></p>	<p>The External Quality Review Organization (EQRO) provided their review on the Consumer Perception Survey Data Reporting; they would like reporting that is more consumer and community-friendly. Currently, providers are selected at 85% but will work towards a 60% selection. The goal is to keep providers from being selected twice in a row.</p> <p>The Timely Access project has been selected for the non-clinical Performance Improvement Project (PIP). Quality Assurance (QA) will review the current Service Request Tracking System and claims data to identify a SA to serve as the PIP population. QA will also invite Doug Cacialli to join the PIP committee to manage the data. Additionally, Jennifer Hallman will consult with supervisors regarding the invitation. Stakeholders to consider for the PIP are the QA Liaisons, SA Chiefs, and providers from the SA selected for the project, Clinical Operations, the CC Committee, Depression and Bipolar Support</p>	<p>In response to EQRO, QI is collaborating with DMH's Chief Information Office Bureau to create a more interactive and simplified form.</p>	<p><i>K. Gilbert</i></p> <p><i>D. Cunnane</i></p>

	<p>Alliance group, and Access to Care Leadership Committee.</p> <p>Based on survey results by the QIC membership, there is an interest to combine the monthly departmental QA and QI meetings based on the overlap of information.</p>	<p>At the next QIC Meeting in April 2020, announcements and updates will be at 9:00 AM to 9:50 AM and the QA/QI overlap will be at 10:00 AM to 10:30 AM. The QA meeting will continue to commence at 11:00 AM.</p>	<p><i>K. Gilbert</i></p>
<p><b>Handouts:</b></p>	<ol style="list-style-type: none"> <li>1) Cultural Competence Policies &amp; Procedures At A Glance</li> <li>2) Policy Bulletin 20-02-DMH</li> <li>3) Policy 201.04 Disclosure of Licensee Probation Status to Clients</li> <li>4) Disclosure of Physician Probation Status – Client Consent</li> <li>5) Policy 111.01 Clinical Policy Development and Review</li> <li>6) Policy 106.17 Policy Development, Review, Approval, and Distribution</li> <li>7) Requirement to Provide Notice to Psychotherapy Clients</li> <li>8) Policy 1100.01 Quality Improvement Program</li> </ol>		
<p><b>Next meeting:</b></p>	<p>Monday, April 13, 2020 at 9:00 AM</p>		

Respectfully Submitted,

Kalene Gilbert, L.C.S.W.