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

Type of Meeting:	SA 7 QIC	Date:	6/15/21	
Place:	Microsoft Teams Meeting	Start Time:	1:35 PM	
Chairpersons:	Greg Tchakmakjian (Chair) Caesar Moreno (Co-Chair) Rosa Diaz (Interim Co-Chair)	End Time:	3:30 PM	
Members Present:	Alexandra Pereira, Anna Orozco, Anthony T Cynthia Juarez, Daiya Cunnane, Dalia Diaz, Ling Hsu, Jazmin Briseno, Jenna Radloff, je Alvarez, Michael Olsen. Minerva Guzman, C Violeta Kim, Wendy Mielke, Yesenia Zacaria	Elizabeth Hernande ennifer Mitzner, Jenn euisha Castro, Rosa	ez, Erica Wirtz, Esther Lee, Greg Tcha y Rodriguez, Kelly Thomas, Linda Na	ıkmakjian Hsiang kamura, Martin
Agenda Item	Discussion and Findings		Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible
Welcome/Introductions	Meeting was called to order at 1:35 PM			Caesar Moreno
Review & Approval of Minutes				

Quality Improvement		Caesar Moreno
Updates	Guest Presenter Dr. Hyun K. Lee with LACDMH Cultural Competency Unit was introduced.	
	Dr. Lee presented on the 2021 Cultural Competence Organizational Assessment	
	Some of the items highlighted during the presentation are as follows;	
	 Stated goal was: Assess staff perceptions regarding the departments responsiveness for cultural and linguistic needs of communities served by LACDMH Survey discussed was made available to all DMH staff including directly operated & LLEs Data found through survey was discussed and analyzed For the consumer groups, Spanish interpreter services were provided for those groups. Other groups included DMH staff (those were conducted in English) 62 quantitative questions (7 open ended qualitative questions to get more feedback from dmh staff) 	Dr. Hyun K. Lee
	 Data collection for this CCOS survey lasted for about 2 weeks – all data reported was individually identifiable. Participants of some of the focus groups in these surveys were highly educated compared to the rest of the population Among DMH employees born outside of the US, majority of respondents indicated they were born in Mexico or Philippines (please refer to presentation for more details related to the results and data analysis) 	
	 Results of focus groups; Consumers recommended using more trained interpreters and possibly certification process to make sure quality of interpretation. The important role of spirituality was highlighted especially for consumers of color whom identified that spirituality was very helpful and enhanced their therapy services with their providers 	

Consumers expressed that the department needs to invest more in the peer programs to empower consumers	Dr. Hyun K. Lee
 CCOAT Qualitative Results from Participants Regarding to trainings staff recommended specificity in trainings unique to cultural groups, congregated in geographically based on neighborhoods and specific to Service Area profiles. It was recommended that include cultural humility training and implicit bias training as well as racism history and its impact on communities. It was recommended to have more diversity in languages including in American Sign Language (ASL). It was expressed that there is interest in attending cultural competency trainings however they would like to have more time and permission to be able to attend. 	Dr. Hyun K. Lee
 When asked "what will enhance DMH's responsiveness to our communities?" staff expressed they wanted to join CCC and USCC subcommittee meetings but needed more time and more permission to do so. Conclusion: 	
 Staff rated overall positively as far as addressing cultural competency Despite these overall positive results there is still things that need to be addressed and improved upon according to the analysis and results. For example, some consumers from the focus group shared their feelings about the services they received expressing about some insensitive providers or issues with some poorly trained interpreters. The importance of continuing to work on making improvements and looking into where we can improve in order to serve our community better in terms of cultural competency was highlighted. 	Dr. Hyun K. Lee

	Greg Tchakmakjian
QI Updated:	,
Survey Collection week is Monday June 21st through Friday June 25th at 4p.m. No more surveys should be administered after 4 p.m. - Deadline for provider to submit Tally Sheets to spa QIC chairs will be June 29, 2021 by noon. - Deadline to paper survey drop offs to spa QIC chairs (Greg) is July 6, 2021 (schedule a time in advance)- Best way to contact Greg is through email - Deadline for paper survey drop off to QI- Unit Spa QIC chairs ONLY—July 9, 2021 (schedule date & time in advance) - For any questions you can email Dr. Daiya Cunnane (dcunnane@dmh.lacounty.gov) or Dr. Jennifer Regan	
(jregan@dmh.lacounty.gov) Announcements by Dr. Daiya Cunnane;	Dr. Daiya Cunnane
 The Developers and Provider Advocacy Office (PAO) are willing to continue onboarding providers (LE and DO) through Friday, June 25, 2021. Should a provider suddenly need access to the CPS app during the survey period, reach out to Daiya Cunnane, dcunnane@dmh.lacounty.gov, or Jen Regan, jregan@dmh.lacounty.gov, right away to request access. Due to an issue, the LE and DO portals will no longer populate consumer/client phone numbers. Providers will need to confirm and enter each consumer cell phone number if Text is the preferred Delivery Preference. 	

	 Some of the surveys prepared by providers have been marked as SENT in the portals. This means that you have sent the survey. NO surveys should be sent until Monday, June 25. If you are preparing your surveys, they should be marked as NOT SENT at this time. On Monday, June 21, providers should enter the portal and change the saved surveys to SENT in order to send the survey. Dr. Daiya Cunnane can be contacted if issues continue to arise in getting access to the CPS portal, please include your provider number. 	
Quality Assurance	 LACDMH is participating on workgroups with the State and discussing change management for documentation reform – Update regarding this is that they are looking at January 2022 and whether the time to implement this is truly feasible. Common errors for CANS & PSC were discussed including; Re-assessment or discharge outcomes are being submitted with no initial entry. Assessments not submitted in sequential order. Assessments completed outside of target age range Possible solutions for errors depends on the type of error for that specific case, and depending on what is occurring would determine the manner of correcting such error. Examples of some of the errors found were reviewed. Reminder: CANS & PSC update can be completed 2 months prior to 6 month period or 2 months after. 	Caesar Moreno

-	DMH is asking providers to hold off on submitting an administrative close because that is currently being reviewed.
-	It was noted that only one provider needs to enter the CANS & PSC data when clt is being served by multiple providers.
-	Additional FAQ is currently being finalized with information regarding outcome measures submission.
-	Legal Entity DMH Chart Reviews coming up;
	 Alma Family Services Will Begin July 12th, 2021
-	List of Directly Operated DMH Chart Reviews coming up was provided as well.
-	QA Resource Video will be available soon.
-	Collaborative Documentation Page is pending to go up as well. Any questions can go to Mark Borkheim.

Caesar Moreno

- QA Email Updates have gone out and were forwarded by Greg Tchakmakjian to Spa 7email list, if you did not receive these, please let Gregg or Ceasar know.
- QA Bulletin 21-03 : Procedure codes Update was discussed
 - Taxonomy code for DMH should be primary taxonomy
 - Some Frequently asked questions and their answers were included in power point (please see Spa 7 presentation for questions and answers)
- Another change coming soon;
 - The definition of "face to face" will be expanding to include time with the client, parent, or guardian.

Adjournment	Meeting was adjourned at : 3:30 PM Respectfully Submitted, Rosa Diaz, LCSW SPA 7 QIC Interim Co-Chair	Next Meeting: September 15, 2021	