



OFFICE OF ADMINISTRATIVE OPERATIONS
 QUALITY, OUTCOMES, AND TRAINING DIVISION – QUALITY IMPROVEMENT UNIT
 COUNTYWIDE QUALITY IMPROVEMENT COUNCIL (QIC)

MEETING MINUTES
JUNE 2021

Type of meeting:	Monthly QIC Meeting	Date:	June 28, 2021
Location:	Microsoft Teams	Start time:	9:00 AM
		End time:	10:30 AM
Recording:	http://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=9255		
Members Present:	See table below.		
Agenda Item	Discussion and Findings	Decisions, Recommendations, Actions, and/or Scheduled Tasks	Person(s) Responsible
1. Review of Minutes	QIC committee reviewed last month's meeting minutes.	The QIC committee approved the May 2021 meeting minutes with addition of one name (Michelle Rittel), and will be posted.	Kalene
2. Cultural Competence Update	DMH Speakers Bureau. Update presentation on Speakers Bureaus activities for the past year.	See PowerPoint presentation.	Sandra
3. Client Perception Survey Debrief	Data Reporting Next Steps; Open Ended Comments Summary Reports; Feedback Survey	<u>Training and Materials</u> <ul style="list-style-type: none"> • Training was straightforward – benefits in the experiential piece. • Anxiety-provoking (depth of information and distribution of emails). 	LyNetta

		<ul style="list-style-type: none">• Provider requesting to be removed.• Anticipation of new process-later received as manageable.• Preparedness in onboarding (i.e., C numbers).• Challenging and noted the 3 levels of access-not just the C number – reduction in those able to assist in collection.• Videos and teams are welcome.• “To the point and clear”• Suggestion: additional instructions re: tally sheets and monitoring.• Testing/training environment to test and practice the portal.• Quick User guide was helpful.• Great demonstration, Daiya. Helped providers relieve anxieties and design workflows (i.e., staff assignments).• Survey forms were not prefilled with county code – separate link is helpful in reducing errors (i.e., without QOL). <p><u>CPS User Portals</u></p> <ul style="list-style-type: none">• Challenging for larger agencies with high census.• Onboarding was not complete and those with access were stretched	
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		<ul style="list-style-type: none">• Three levels and azure ID took days even for those with access.• Required additional training at LE level.• Overcame QI activity for two weeks.• F/U with PAO re: C Number expirations.• HCFS conducted a time study.• Client turnover = new clients.• User-friendly and some providers preferred the e-version.<ul style="list-style-type: none">• No need to print or waste paper on declined surveys.• Feeling like they are “chasing” clients to confirm receipt.<ul style="list-style-type: none">• Day 1 was slower and turnaround was approximately a day later.• Prefilled information was helpful• Smaller agencies rely on less staff to assist and experienced a greater impact. <p><u>Technical Assistance</u></p> <ul style="list-style-type: none">• SA Leads were accessible<ul style="list-style-type: none">• Reconsider daily monitoring as a source of additional support.• Daiya was responsive and answered questions instantly and was detailed – provider stayed in the fight due to her support.	
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		<p><u>Areas for Improvement</u></p> <ul style="list-style-type: none"> • Workflow challenges related to the magnitude and unfamiliarity of the portal. • Provide additional guidance re: C numbers and onboarding. • Prediction that SA 2 response rates may be down likely due to multiple factors (effort, workflow, client care and services, or other clinic priorities). • F/U with UCLA/State: scanned in somehow by the provider so we don't have to deal with the logistics of paper survey drop-offs. • Real time data on completion status. • Easier comments review – sorting was not efficient. • Explore other options for tracking refusals (i.e., without creating a survey in the portal). • Refer to Gallup portal. <p><u>Miscellaneous</u></p> <ul style="list-style-type: none"> • Clients 13 and up received a text reminder. 	
<p>4. Quality Improvement Council Member Update</p>	<p>Acknowledgement of loss of colleague.</p>		
<p>Next Meeting:</p>	<p>July 26, 2021 at 9:00 AM</p>		

NAME	AGENCY	DMH PROGRAM
Angelica Fuentes	DMH	Compliance
Ann Lee	DMH	SA 8
Caesar Moreno	The Whole Child	SA 7
Courtney Stephens	MHALA	SA 1, 8
Daiya Cunnane	DMH	Quality Improvement
Dara Vines	DMH	SA 5
Debra Berzon-Leitelt	DMH	SA 1
Erica Melbourne	DMH	SA 6
Gassia Ekizian	Foothill Family	SA 3
Greg Tchakmakjian	DMH	SA 7
Helena Ditko	DMH	Clinical Standards and Clinical Policy
Ilda Aharonian	DMH	QA Training and Operations Team
Jennifer Regan	DMH	Quality Improvement
Kalene Gilbert	DMH	Quality Improvement
Kimber Salvaggio	DMH	SA 2
Kristin Gray	DMH	SA 3
Lisa Harvey	Para Los Niños	SA 4
Ly Ngo	DMH	Clinical Risk Management
LyNetta Shonibare	DMH	Quality Improvement
Margaret Faye	Hathaway-Sycamores	SA 1-4, 6-7
Marylune Im	DMH	SA 1
Michele Munde	Star View Behavioral Health	SA 8
Michelle Rittel	Step Up on Second	SA 4-5
Misty Aronoff	Step Up on Second	SA 4-5
Paul Arns	DMH	Clinical Informatics
Randolph Faveau	DMH	Compliance
Rosalba Trias-Ruiz	DMH	SA 3
Sandra Chang	DMH	Cultural Competency Unit
Socorro Germanian	Wellnest	SA 4-7

Susan Lam	Alma Family Services	SA 7
Wanta Yu	DMH	Quality Assurance