

LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
Service Area 2 Children’s QIC Meeting
QUALITY IMPROVEMENT COMMITTEE MINUTES

Type of Meeting	SA 2 Children’s QIC	Date	February 16, 2023	
Place	Online – Teams Meeting	Start Time	1:30pm	
Chairperson	Michelle Rittel	End Time:	3:30pm	
Co-Chair	Open			
Members Present	Alexandria Johnston, Amarilys Reyes, Araceli Ortiz, Armen Yekyazarian, Claudia Morales, Daiya Cunnane, Dave Mendez, David Lopez, Emily Fitleberg, Esther Lee, Gina Leggio, Heather Bowen, Heylee Barriola, Iliana Martinez, James McEwen, Jeanine Caro-Delvaille, Jennifer Mitzner, Judy Cardona, Karely Gutierrez, Karina Krynsky, Katherine Smith-White, Kaylee Devine, Kimber Salvaggio, Luis Pereira, Maggie Holland, Michele Burton, Sheryl Lesner, Stephanie Ochoa, Tanya Khanjian, Tiffany Rabbani, Tiger Doan, Victoria Shabanzadeh			
Agenda Item & Presenter	Discussion and Findings		Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Call to Order Introductions and Announcements: Michelle Rittel	Meeting called to order at 1:30pm. Introductions were made.			
Review of Minutes: Michelle Rittel	Minutes from December 15, 2022 meeting were previously emailed for review and approved in the meeting.			

Agenda Items & Presenter	Discussion & Findings		Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
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Quality Improvement (QI)

DMH QIC Meeting

Report:

Michelle Rittel

QA vs. QI: QA vs. QI : What's the Difference handout was previously emailed to everyone. Handout was reviewed and discussed. Differences between QA and QI were highlighted.

Patient's Rights Office – Request for Change of Provider Policy and Procedure 200.05: Policy and Procedure were reviewed. Request for Change of Provider log and report were reviewed. The Program Manager must sign the Request for Change of Provider log before it is submitted. Reasons for denying a Request for Change of Provider were discussed.

Compliance, Policy & Audit Services Update: Monthly bulletins with new, revised and deleted policies are posted online and can be reviewed on the DMH website. The October and November 2022 bulletins were briefly reviewed.

CAPP: The CAPP meeting is an online Teams meeting on the third Tuesday of the month, 11am-1pm. All Parent Partners are strongly encouraged to attend. Please have Parent Partners contact Cristina Rojas to be added to the email distribution list at crrojas@dmh.lacounty.gov

Presentation: C Number Information, CPS Updates and CPS Best Practices – Presented by Daiya Cunnane from DMH QI. Daiya will email copies of the slides for everyone. The first part of the presentation was Maintaining C Numbers for Consumer Perception Survey (CPS) Electronic Application Access. This information applies only to LE providers. C Numbers and process for getting them were reviewed. This year there will be a testing environment that everyone will be able to access to practice before the survey period. It now takes approximately 72 hours to get a C Number after it is requested. Once you have a C Number, you need to set a reminder to log in every 25-28 days to keep the C Number from expiring. Staff who already had a C Number must update

<p>Departmental QI Meeting Report, contd.: Michelle Rittel</p>	<p>their information by completing a new C Number packet annually and they will need to log in every 25-28 days to keep your C Number active. Instructions for setting up Multi-factor Authentication were reviewed. Instructions for accessing the testing environment were reviewed. If your C Number is not working, please contact the HelpDesk helpdesk@dmh.lacounty.gov 213-351-1335.</p> <p>The second part of the presentation was Consumer Satisfaction Survey Best Practices: Survey Collection. These strategies were collected through focus groups in Spring 2022 with organizations that collect large volumes of surveys and have consistently high satisfaction scores. The handout was reviewed, including strategies of Messaging, Communication, Tracking Methods and Staff Support.</p> <p>The third part of the presentation was 2023 Consumer Perception Survey (CPS) Updates. Current Updates: Planning meetings have begun, CIOB Application Development team is updating the LACDMH electronic portal, PAO is setting up LE providers with C Numbers and CPS application access, QI unit is creating provider support materials and revising trainings, no updates from UCLA to date. LACDMH Electronic Portal Updates: Training environment for DO & LE – must enter provider’s own email and phone when creating practice survey records, working to add the same filtering functions for each portal, removing previous CPS records from portal, working on the T Mobile issue, LACDMH electronic application Comment report after the period is complete. Other Updates: Provider lists are being distributed in the SAs, 2023 CPS General Overview (Recording) coming soon – will assist providers in identifying the best survey version for their site and will have links to Sexual Orientation and Gender Identity (SOGI) training links.</p>		
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Quality Assurance (QA)			
<p>Departmental QA Meeting Report: Michelle Rittel</p>	<p>General QA Updates: Link to February 2023 QA/QI Monthly Central Meeting recording and slides was provided. Next QA On the Air is on 2/22/23 at 9am. Link to meeting was provided. Discussion topics from the SA2 Children’s QIC poll were briefly reviewed and discussed. Questions regarding use of the Same Day Assessment were raised, particularly about the lack of prompts on the assessment. Strategies and suggestions for addressing this with staff were discussed. Questions regarding claiming for Collaborative Documentation were also addressed. Armen Yekyazarian from DMH QA will follow up on this issue with DMH QA.</p> <p>State Updates: CalAIM – Peer Support Services Updates were briefly reviewed. Peer Support Services have been added to the Org Manual and Guide to Procedure Codes and QA is updating NAPPA/IBHIS to include new category/discipline for Certified Peer Support Specialist – a notice will go out when it is available with direction on claiming. Payment Reform/CPT Codes Updates were briefly reviewed. DHCS released the Final Billing Manual and December & January QA On the Air recordings specifically addressing Payment Reform/CPT issues are available. The next QA On the Air will also address these issues.</p> <p>Audits: None scheduled for SA2 Children’s Providers.</p> <p>Training and Operations: LE Contract Provider Chart Reviews – Current and upcoming reviews include Tobinworld and Optimist Youth Homes. They are in the process of coordinating additional reviews for March and April.</p> <p>Annual QA/QI Report & Written QA Process – Announcement with updated forms went out 1/13/23, they are</p>		

Departmental QA Meeting Report, contd.:
Michelle Rittel

due by 2/15/23, this year new QI items were incorporated into the Report and Process forms. Please contact QA mailbox with any questions.

Collaborative Documentation Training Update – trainings have been on hold and they are in process of obtaining a vendor to assist in trainings. Coordination of future trainings will resume once contract is complete. Link to the Collaborative Documentation webpage on the DMH site was provided.

QA Discussion Form – Presented by Armen Yekyazarian from DMH QA. Proposed Forum for QA Process related issues – a regular ongoing time slot during monthly SA QIC meetings used as a forum for providers to discuss challenges they are facing related to their agency’s QA process. Feedback from providers was requested.

Policy & Technical Development: QA Bulletin 23-01 – Updated Organizational Provider’s Manual – Bulletin was previously provided to everyone as an email handout. Updates were briefly reviewed.

Network Adequacy & Access to Care: Access to Care – We are currently under a plan of correction with DHCS and need to improve Access to Care quickly. The Network Adequacy/Access to Care webinar on 2/7/23 focused on ways to improve capacity and access to care. A link to the recording of the meeting was provided. All providers are expected to assist in improving Access to Care. You are invited to the next webinar to discuss further.

Access to Care Plan of Correction – We are required to provide timely access to care at least 80% of the time. At the last review we were at 72-74%. DMH will work on Plan of Correction in 3 phases: Immediate, Medium Term, Long Term. In the meantime, “the MHP must permit out-of-network access for as long as the MHP’s provider network is unable to provide the services in accordance with the standards”.

Improving Access to Care – Review of presentation from Rio Hondo MHC at the last Network Adequacy/Access to Care webinar on their Admission/Intake Clinic Operation Model.

<p>Departmental QA Meeting Report, contd.: Michelle Rittel</p>	<p>They have a full time admission/intake team, which they have had for several years and have recently modified to meet Access to Care requirements. 95% of service requests per month are scheduled for an assessment and 95-100% are scheduled within the required access to care timeline. Team expectations were reviewed.</p> <p>Reminder – A link was provided to the training video on the new screening process and tools, per QA Bulletin 22-11. Any staff responsible for assisting with new requests for services is encouraged to watch the video. An additional link was provided to the FAQs which will be posted next to the QA Bulletin on the QA Bulletins webpage.</p> <p>Updated Provider Directory – was released on 1/9/23. Major changes were reviewed. They are continuing to work on modifications to the Provider Directory. A link was provided to the Updated Provider Directory Guide.</p> <p>NAPPA – Please complete any missing information in NAPPA immediately. Links to video recordings demonstrating how to correct the missing information in NAPPA were provided. There are separate links for DO and LE providers.</p> <p>Accepting New Beneficiaries – there are 972 Service Locations for DO and LE providers. Of those, 363 have GOCS and/or PEI programs available. 735 (76%) of those providers have completed Available Methods of Service Delivery, up from 9% in December. 807 (83%) completed Programs Available Option – 159 are missing Age Group and/or Accessible By for one or more programs available. Missing Any Data – Overall compliance is 70%.</p> <p>Health Information Management (HIM): DO only. Records Retention, Policy 401.01 – Policy was reviewed. Contacts for HIM were provided.</p>		
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<p>Departmental QA Meeting Report, contd.: Michelle Rittel</p> <p>Suggested Items for Next Meeting:</p> <p>Handouts:</p>	<p>There were no suggestions.</p> <p>QA Bulletin 22-10 QA Bulletin 22-11 QA vs. QI QI Presentation PRO 02 2023 SA2 Children’s QIC Minutes – December 22, 2022 SA2 Children’s QIC Agenda – February 16, 2023 SA2 Children’s QIC Meeting Power Point – February 16, 2023</p>		
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Agenda Items & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible & Due Date
Next Meeting:	Thursday, April 20, 2023 1:30-3:30pm Location: Online – Teams Meeting		

Respectfully submitted,

Michelle Rittel, LCSW