

**LOS ANGELES COUNTY- DEPARTMENT OF MENTAL HEALTH
Service Area II Program Administration**

Adult Quality Improvement Committee Meeting

July 20, 2017

San Fernando Mental Health Center

10:00 am-12:00 pm

Agenda

Welcome- Introductions & Agency Updates	All
Review and Adoption of May 2017 Minutes*	
Quality Improvement	
Clinical Quality Improvement	Kimber
PBM	
OMD	
MHSIP*	Kimber
PRO	Office of Pt's Rights
Cultural Competency Report	Sandra Chang Ptasinski, Ph.D. DMH PSB- QID
QI Work Plan Goals Summary CY 2017*	Kimber /All
Policy Updates*	Kimber
QI Announcements	All
EQRO	
Test Call TY's	
Quality Assurance	
Audits	All
Medi-cal Certification	Kimber
State DHCS Updates	Kimber/All
Waiver Reminder	
SHIG*	
Training & Operations	Kimber/All
Documentation Trainings*	
CW QA LE Chart Reviews	
Collaborative Documentation	
QA Policy Updates & Technical Asst	Kimber
Clinical Forms & Quality Assurance Bulletins	Kimber
QA Announcements	All
Other	
How is this information disseminated in your agency	All
Future Agenda Items & Adjournment	All

Handout*

Next Meeting for SA 2 Adult QIC: September 21, at 10-12 pm

COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
Service Area 2 Adult
QUALITY IMPROVEMENT COUNCIL (QIC) Minutes

Type of Meeting	Service Area 2 Adult Quality Improvement Committee	Date:	July 20, 2017	
Place	10605 Balboa Ave 2nd fl Conference Room	Start Time:	10:00 a.m.	
Chair	Kimber Salvaggio	End Time:	12:00 p.m.	
Co-Chair	None			
Members Present	ACT Wellness Ctr - Michelle Logvinsky APCTC - Tiger Doan Child & Family Ctr - Karen Lee Didi Hirsch – Miriam Gonzalez DMH SB 82 - Ramona Casupang DMH SCVMHC - Sabrina Barscheski DMH SFMHC – Jonathan Pattow DMH Urgent Care – Amy Kress ECDA – Claudia Pena ECDA – Kat Fleming El Dorado – Lisa Alfonso Hillview MHC - Denise Greenspan Hillview MHC - Julie Jones IMCES - James Pelk JFS - Dora Escalante SFVCMHC, Inc. - Leslie Di Mascio Tarzana Tx Ctr - Karry Friedman Tarzana Tx Ctr – Lorraine Ragosta Topanga West Guest Home - Michelle Logvinsky			
Absent Members	DMH PRO - DMH PSB Cert – DMH PSB Countywide QA - Allen Pouravanes DMH PSB Countywide QID - LyNetta Shonibare DMH PSB Cultural Competency Unit - Sandra Chang-Ptasinski DMH WVMHC - Sima Baikov PACS-LA - SFVCMHC, Inc. - Angela Khan			
Agenda Item & Presenter	Discussion and Findings	Decisions Recommendations Actions Tasks	Person Responsible	
Call to Order & Introductions	The meeting was called to order at 10:00 a.m.	Introductions were made	K. Salvaggio	
Review of Minutes	Review and Adoption of May 2017 Minutes		All	

Agenda Item & Presenter	Discussion & Findings	Decisions Recommendations Actions Tasks	Person Responsible
Clinical Quality Improvement	<p style="text-align: center;"><u>QUALITY IMPROVEMENT</u></p> <ul style="list-style-type: none"> • Pharmacy benefits mgmt <ul style="list-style-type: none"> ○ How's it going in the clinics? ○ Id cards? ○ General customer service from clinic and 800 number ○ Hard to get id numbers ○ Questions from clients ○ Main focus of OMD RN is id numbers ○ Dr. Kim resigning from dmh • OMD <ul style="list-style-type: none"> ○ Question on when contractors will have access to SI ○ Contractors have RSA token access ○ Must have a 'C number' prior to access ○ Have about 400 contractors status quo for now ○ More to come next month ○ Challenges: <ul style="list-style-type: none"> ▪ Drop downs – not satisfied that the event was really looked at ▪ System or sub abuse issues reviewed ○ 'Just cultural system' – system issues not people issues ○ Hope that more reporting occurs –no blame ○ Want to add complaints module that PRO will use for grievances ○ And may add claims too ○ CRM is not on SI program – use manual form • Memo to providers about sharing info with family members/significant others <ul style="list-style-type: none"> ○ met with MH commission – MHC stated that it was not as user friendly as MHC would like so re- 	<p style="text-align: center;"><u>QUALITY IMPROVEMENT</u></p>	<p>Provided by Office of the Medical Director staff reported by Kimber</p>

<p>MHSIP</p>	<p>doing the health and human service document about sharing info with family and sig others</p> <ul style="list-style-type: none"> o Info will be added to the Privacy Officer's hipaa training <ul style="list-style-type: none"> • Re-doing some forms due to changes brought on by drug medi-cal <p><u>MHSIP May 2017</u> MHSIP May 2017</p> <ul style="list-style-type: none"> • 7500 rec'd-slightly less than usual <p><u>MHSIP May 2016</u></p> <ul style="list-style-type: none"> • See handouts • Table compare to county average some to state and some to national average • Included if 10 or more surveys rec'd but it should be at least 25 surveys for validity • 3 questions reporting to health agency <ul style="list-style-type: none"> o Services in preferred language – 95 % ok o Staff sensitive to cultural background o Materials available in preferred language 		
<p>Pt's Rights</p>	<p>No Report</p>		
<p>Cultural Competency Report</p>	<ul style="list-style-type: none"> • Updating CC Plan • Organizational assessment with a vendor <ul style="list-style-type: none"> o Will have a tool sent to us to complete • During May is MH month <ul style="list-style-type: none"> o Underserved native campaign for bus, TV and radio o API Vietnamese and Cambodian media campaigns in newspaper o Eastern Russian PSA's Armenian and Russian TV o Latino groups TV & radio programs o Lgbtqi2s radio • ICE memo coming along with a P & P for staff • Updating ccc website – with flyers that 		<p>Provided by Sandra Chang-Ptasinski reported by Kimber</p>

<p>QI Work Plan Goals Summary CY 2017*</p> <p>Policy Updates*</p> <p>SA QI Project/Test Calls*</p> <p>QI Announcements</p>	<p>have information on what to do when you know someone with emotional distress</p> <ul style="list-style-type: none"> • uia@lacounty.gov office of immigrant affairs – LAC for you <ul style="list-style-type: none"> ○ Prepared, informed decisions <p>The group discussed the work plan goals summary</p> <ul style="list-style-type: none"> • See June & July handouts • Thank you to ECDA and IMCES • Discussed the volunteer experience <p><u>EQRO Fall Visit</u></p> <ul style="list-style-type: none"> • Eqro SA 3 and 7 were selected for the review • Coming back in September • Many of the participants in the QA/QI focus group did not know about PIP's – VANS/CSECY • Looking at how trainings impact system, clients, etc 		<p>Kimber/All</p> <p>Provided by Compliance Unit</p> <p>Kimber/All</p> <p>Kimber/All</p>
<p>Audits</p>	<p><u>QUALITY ASSURANCE</u></p> <ul style="list-style-type: none"> • PERM audit updates <ul style="list-style-type: none"> ○ Discussion with state rep – current term over – LAC DMH is good for next 3 years ○ If you do receive a request it was submitted incomplete ○ Be responsive ○ No feedback if part of perm audit • 3 SA 2 LE's had recent audits <ul style="list-style-type: none"> ○ Best practices shared among the providers on preparation, strategies on avoiding findings 	<p><u>QUALITY ASSURANCE</u></p>	<p>Kimber/All</p> <p>Kimber/Denise Greenspan/ Leslie DiMascio/All</p>

<p>Medi-Cal Certification*</p>	<ul style="list-style-type: none"> • Reminder site cert- impact on travel time/claiming • Second quarter of 100% compliance • If billing medi-cal; cert your site exception a field visit • A site is a place you go repeatedly on a consistent basis at a site (school based vs school linked) • Satellite vs site – less than 20 hours no more than 2 staff – best to cert as full provider not satellite • For clearance for school sites? Districts are different – coordinator to determine if school is fire safe (dif than fire clearance) go to principal 	<p>Provided by PSB-Certification staff reported by Kimber</p>
<p>State DHCS Updates</p>	<ul style="list-style-type: none"> • Waivers –remind QIC members <ul style="list-style-type: none"> ○ If practicing outside of waiver- LE will have to pay back \$ ○ Continuity with process despite staff turnover ○ 10-03 DHCS waiver info notice • Sharing mental health info* SHIG 	<p>Provided by PSB-QA staff reported by Kimber</p>
<p>Training & Operations</p>	<ul style="list-style-type: none"> • LE Chart Review <ul style="list-style-type: none"> ○ SFVCMHC and ED ○ Discussed the experience ○ Best practices sharing • Collaborative documentation update <ul style="list-style-type: none"> ○ Pilot is moving ahead ○ Will be training DO staff internally • Trainings <ul style="list-style-type: none"> ○ Health Navigation – like Pacific Clinics ○ SB 82 will be updated due to now having more info on what the teams do 	<p>Provided by PSB-QA staff reported by Kimber</p>
<p>QA Policy Updates & Technical Asst.</p>	<p><u>QA Policy and Technical Development*</u></p> <ul style="list-style-type: none"> • Final Clinical Forms Bulletin 17-02 updated srl <ul style="list-style-type: none"> ○ By Jan should be able to send data in a web service call ○ October is when we think the web service will become avail 	<p>Provided by PSB-QA staff reported by Kimber</p>

- The policy gives contractors 3 months to get info
- Send all since July 1st in batched data to compare timeliness against NOA issuance****
- For DO's no paper copy of NOA A or E to PRO– pending a note from Jen
- Monitoring report for DO's
- Final QAB 17-12 COS manual
 - New sections reimbursement and documentation rules and cos note requirements
 - Travel time has changed
 - Trainings begin July
- Final QAB 17-13 determining if a svc is billable to Medi-cal
 - Do you want to pay for this if you saw the bill?
 - Are there cliffhangers in your PN?
 - Reinforce clinical loop
 - Ask the client -Was today helpful? Why? Asked after each svc – so if this was helpful, let's do this again next time –helps with the plan portion of PN
- Service Verification Reminder
- Final QAB 17-14 Org manual
 - Certification chapter
 - Psychiatric inpt hospital services section
 - Other changes
 - Remove smart requirement*** - language from state contract easier our smart was our std – “dmh rumors/folklore or a moment a silence for the passing of...”
 - Requirement for PN – describe how svcs reduced impairment, restored functioning or prevented deterioration

	<ul style="list-style-type: none"> ▪ Added svc component for intensive care coor – tcm ▪ Chap 1 spec pops will include tbs icc and ihbs ▪ Added chap on certification • Final QAB 17-15 PA's and Advanced Practice Pharmacists • NOA monitoring <ul style="list-style-type: none"> ○ QA bulletin coming collaborating with PRO 		
Announcements	None at this time		
Handouts	<ul style="list-style-type: none"> ➤ Draft of May 2017 Minutes ➤ MHSIP Spring 2016 Provider Level Data ➤ QI Work Plan Goals Summary CY 2017* ➤ June & July 2017 Policy Updates ➤ SHIG Memo ➤ July 2017 Documentation Training Sch'd 		
Next Meeting	➤ September 21, 2017		

Respectfully Submitted,

Kimber Salvaggio