

LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH

SA 4 Quality Improvement Committee (QIC) Meeting Minutes

Type of Meeting:	SA 4 Quality Improvement Committee (QIC)		Date:	June 19, 2018
Place:	St. Anne's Maternity Home 155 N. Occidental Blvd., Los Angeles, CA, 90026		Start Time:	10:30am
Chair & Co-Chair:	Chair Wendy Lopez, LACDMH; Co-Chair – Christina Kubojiri, LMFT, Children's Institute Inc.; Co-Chair – Yen-Jui Lin, LACDMH		Adjournment:	11:30am
Members Present:	<ul style="list-style-type: none"> • Jose Reyes • Silvia Yan • Brenda Lopez • Evelyn Gutierrez • Leslie Shragar • Arleen Villanueva • Haydee Guevara • Sam Pina • Bertrand Levesque • Naomi Arellano • Devanne Hernandez • Lauren Permenter • Michael Olsen • Jonathan Figueroa • Jennifer McKirdy-Corletto • Wendy Rivas 	<ul style="list-style-type: none"> • Lilia Sheynman • Christina Kubojiri • Christa Westberry • Maria Rubic • Lynda Evans • Dora Escalante • Chloe Gomez • Jessica Estrada • Eunice Jeon • Antoinette Cortez • Michelle Culver • Lisa Harvey • Cristina Sandoval • Shad Cruz • Carmen Chacon • Alia Man 	<ul style="list-style-type: none"> • Milena Melkonyan • Jessie Marquez • Arease Wheeler • Desiree Odom • Jennifer Jimenez • Rebecca Yoo • Hugo Gallic • Stacy Ray • Jacob Cohen • Sawako Nitao • Maria Juarez • Rosita Lopez • Suyapa Romero • Blanca Esthela • Lolita Namocatcat • Yen-Jui Lin 	
Members Absent:	<ul style="list-style-type: none"> • AIDS project LA • Alma Family Services • Anne Sippi Clinic • Behavioral Health Services • Child Family Guidance Center • Dignity Health • DMH AOT • DMH ASOC • DMH TAY • DMH SFC • DMH PSB • DMH QI Division 	<ul style="list-style-type: none"> • DMH downtown mental health • DMH Compliance • DMH PRO • DMH Specialized Foster Care • Filipino American Services Group • Gateways Hospital • Gateways Homeless Services • Gateways Perry Village • Health Research Association USC • Hollywood Mental Health Center • Uplift Family Services (EMO) • LAC-USC Medical Center 	<ul style="list-style-type: none"> • Northeast Mental Health Center • Pacific Clinics • Saban Free Clinic • SSG Alliance • SRMT • Step up on Second • Travelers Aid Society of LA • LAMP Community • LA Gay & Lesbian Center • Mental Health America • EMO 	
Introductions:	Members present introduced themselves.			
Minutes Approval:	No corrections/revisions indicated on May 2018 minutes			
Announcements:				

Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, Scheduled Tasks	Responsible Person / Due Date
<p>QI Updates</p> <p>Christina Kubojiri</p>	<p>Quality Improvement updates:</p> <ul style="list-style-type: none"> • Office of Medical Director: <ul style="list-style-type: none"> ○ Policies and procedures for 14 new Pharmacist/Advanced Practice Pharmacists are being created now ○ Upkeep of medication rooms policies (better chain of custody/maintenance) ○ Medication rooms currently should not have controlled substances (such as Ativan). Currently there is no control of vendor. DA licensure is in process to order controlled substances. ○ On-site Waste destruction and storage protocol <ul style="list-style-type: none"> ▪ No way to account for these medications for waste ▪ DMH staff need training from Department of Transportation for transportation of medication back and forth <ul style="list-style-type: none"> • There are small allotment of funds for small number of staff to train ○ “Bill to-Ship to” <ul style="list-style-type: none"> ▪ License is needing to be obtained by the licensed pharmacist to receive and account for medications. <ul style="list-style-type: none"> • This process is currently being organized and streamlined ○ There are some issues at co-located sites between DMH and DHCS; DMH vs. DHCS only meds – 6 month projected to protocol completion ○ Non-Clinical PPP - Magellan may be implementing a survey for administration to clients <ul style="list-style-type: none"> ▪ Discussing “survey fatigue” for providers and clients <ul style="list-style-type: none"> • They are discussing whether it would be a push to collect all surveys within a two week period or as higher use sites to collect more surveys than the smaller ones. ▪ Suggestion was made for DMH to create a Survey Calendar • Patients’ Rights Office: <ul style="list-style-type: none"> ○ Grievance & Appeal online system is currently awaiting approval/review by CIOB ○ New Draft Change of Provider Form is completed. Clients will complete the paper Change of Provider Form; however staff will enter the Change of Provider Requests into the online system per the roll out completion <ul style="list-style-type: none"> ▪ Paper forms completed by cits can be shredded once logged into online system. ▪ All entries for the prior month are still due by the 10th each month, but you can enter your change-of-provider-requests as they occur. 		

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<p>QI Updates</p> <p>Christina Kubojiri</p>	<ul style="list-style-type: none"> ▪ Easy process. Agency will enter their clinic name and license number. If agency has more than one location, you will have the option to select specific location once you are logged in the system. ▪ An outcome must still be updated in your Change of Provider Request online within 10 days. If not, you are out of compliance. <ul style="list-style-type: none"> • Do not enter outcomes as "Pending" or "unknown". This is out of compliance if not a specific outcome at 10th day. (approve or denied). • Agencies will be contacted when out of compliance. ▪ If there is no Change of Provider Requests that month, there is an entry specific to this. ▪ It is important to indicate 3 Contact Persons per legal entity/location (primary contact, program manager, 3rd contact) in event one or more of those persons listed become unavailable. ▪ Trainings will be provided once all D/O staff info has been collected and a firm roll out date will be set at that time. D/O sites will implement first and then to Contract Providers. ▪ 2 pilot D/O sites have already been using the system to work out "bugs." ▪ DMH is attempting to collect all context of D/O staff information as CIOB needs to issue licenses to each contact person. ▪ There are dashboard records that can be accessed for your license for review. <ul style="list-style-type: none"> ▪ If contacts leave an agency, it is important to update DMH through their email: COP@dmh.lacounty.gov to issue other staff the license • Policy Updates – Handout provided to members <ul style="list-style-type: none"> ○ DMH staff – check Learning Net under "mandatory trainings" to complete the Compliance Training assigned ○ See attached handout • Cultural Competency: <ul style="list-style-type: none"> ○ DHCS network adequacy – the State has postponed collection of data until October 1st, <i>but DMH is continuing with the requirement to have all practitioner information entered between June1-22nd</i>. Continue to enter data into the online system as practitioner status' change or new staff are brought into agency. The application is remaining open for data to be entered as needed at any time. ○ Hopefully report option will become available in the future • Clinical PIP – Reduction of hospitalizations of CSIRS <ul style="list-style-type: none"> ○ Clients with COD issues can also participate to reduce hospitalizations related 		

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<p>Quality Assurance updates</p> <p>Christina Kubojiri</p>	<p>to COD issues.</p> <ul style="list-style-type: none"> ○ Crisis Residential Treatment Programs <ul style="list-style-type: none"> ▪ 10 beds ISR available per month ▪ Very minimal use of these resources ▪ Referrals come thru, but doesn't meet criteria or intake may be making process difficult. ▪ Hospitals are also prematurely discharging clients <ul style="list-style-type: none"> • D/C protocol is being piloted with 3 hospitals now ○ They are tracking monthly discharges <ul style="list-style-type: none"> • Non-Clinical PIP <ul style="list-style-type: none"> ○ ACCESS PIP has ended. ○ Looking into working in tandem with Pharmacy/psychiatrist department on a non-clinical PIP • MHSIP May 2017 will be posting soon. Information will be presented to service area QIC meetings by DMH QI staff at an upcoming meeting <ul style="list-style-type: none"> ○ May 2018 collected 15,610 surveys <p>Quality Assurance Updates:</p> <ul style="list-style-type: none"> • Announcements: <ul style="list-style-type: none"> ○ Howard Washington is the new Program Manager IT to assist QA/depts. <ul style="list-style-type: none"> ▪ Will be in charge of Network Adequacy Project and D/O Meaningful Use ○ Olga B – HIM dept technician. She says she still learning and trying to understand everything right now. • Audits: <ul style="list-style-type: none"> ○ MR Grant upcoming audits: Para Los Ninos and Guidance Center ○ Auditor Controller audits are no longer occurring • Medi-Cal Certification Updates - Reminder about Waivers for psych candidates – <ul style="list-style-type: none"> ○ When they reach 48 units a waiver is required. Someone needs to manage monitoring of this. They cannot claim for certain services while they are interim BBS registration/Waiver. <ul style="list-style-type: none"> ▪ There are a large number of agencies not in compliance. When contacted by DMH they say they were unaware, but they should be 		

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Quality Assurance Updates Christina Kubojiri	<p>attending SA QIC meetings where info is passed along</p> <ul style="list-style-type: none"> ○ Need to keep in mind that if there are missing transcripts, a letter is required from the school. ○ Practicum does count toward those hours ○ When staff attended multiple schools can be an issue when one is semester and the other is quarter system. ○ Guide to Procedure Codes will be updated to include more specific eligibility to claim codes when psych candidates ○ QA Bulletin draft was sent to the State but they neither denied or approved the bulletin about waivers. <ul style="list-style-type: none"> ▪ State indicated a letter is coming out that should help clarify these issues. ○ Agencies should have a front end process to avoid issues with waivers <ul style="list-style-type: none"> ● Training updates – Handout provided to members <ul style="list-style-type: none"> ○ Trainings are scheduled through September ○ Presentations are scheduled through August ○ 6/28/18 ICC/HBS registration is open ○ Contact Nikki Collier with registration issues/questions ● Legal Entity DMH QA reviews: <ul style="list-style-type: none"> ○ They've separated their informational letter into 2 attachments as some people were not scrolling through both pages to see how to prepare the charts for review date. ○ They will now also require progress notes be provided that are driving the current review period's Assessment, CTP, and medication support. ○ If EHRS at an agency has issues printing documents to include all required elements, they must provide the supporting documentation (written/printed) ● Bulletin 18-06 Network Adequacy <ul style="list-style-type: none"> ○ Even though the States data collection quarter date has shifted to Oct 2018, DMH is requiring that everyone still stick with the June1-22nd update in the application. ○ DMH is looking into contacting those agencies that still have not "touched" the application to enter data. ○ FAQ is again being refined – read and understand FAQ prior to entering data so that everyone has the same understanding of defined term ● DRAFT MAT bulletin reminders – will be presented at the upcoming MAT conference next Thursday along with MAT claiming guidelines. ● Clinical Forms Bulletin sent to agencies 6/11/18 <ul style="list-style-type: none"> ○ Notice of Privacy provided in Eng/Sp <ul style="list-style-type: none"> ▪ HIE – DMH provides information to DHS, but client can opt out of 		

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Quality Assurance Updates Christina Kubojiri	<p style="text-align: center;">this exchange</p> <ul style="list-style-type: none"> • DMH Medication consent combined form is available to review • QA Requirement for D/O only that started May 1st – <ul style="list-style-type: none"> ○ D/O are submitting chart reviews thru IBHIS on their “short review form” ○ 741 reviews have been submitted so far from sites • Proposal for Consideration: Opening/Closing of Episodes Policy – <ul style="list-style-type: none"> ○ As long as you have made informed consent, client does not have to be there face-to-face for all cases to be opened. Example: Client does not show up for first 90791-Assessment session, but mother is able to receive informed consent and provide a lot of information prior to meeting with the client. Can open and claim for this assessment with collateral. More information to come. ○ Still in “proposal” stage – bulletin draft to come. • ICC & IHBS Expansion & Tracking CFT meetings: <ul style="list-style-type: none"> ○ For <i>non-intensive programs</i> only that are using Core Practice Model – The training/certification requirement is <i>not</i> required for non-intensive staff. <ul style="list-style-type: none"> ▪ Question: Won't staff still need to know the HK codes and understand CPM? If they don't attend a training, how will they learn the model? Answer: The Manuals are available for review or supporting supervisors can guide them. ▪ All programs will be given access to T1017HK and H2015HK beginning July 1, 2018. ○ For <i>Intensive programs</i> – the CPM training/certification is still required. ○ DMH QA is working on clarifying which programs are considered Intensive vs. Non-Intensive ○ Tracking of CFT Meetings – soon a modifier will be required to be indicated on all progress notes that are claiming for CFT meetings. Similar to the modifier when we currently select “telephone” for example. More info to come. • Medication Support Progress note presented to Psychiatrists in D/O – Handout provided to members 		

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Next Meeting: June 19, 2018; St. Anne's Maternity Home, 155 N. Occidental Blvd. (Classroom), L.A., CA. 90026
Respectfully Submitted



Christina Koberjohr - LMFT – QA Clinical Coordinator, Children's
 Institute, Inc.
 SAA Co-Chair

