



**LACDMH Service Area 7 Administration  
Quality Improvement / Quality Assurance Committee**

**February 19, 2019  
2:00 to 4:00 p.m.**

- 1. Welcome/Introductions Caesar Moreno, LCSW
- 2. Review of January 2019 minutes Caesar Moreno, LCSW
- 3. **Quality Improvement: 2:00 to 3:00 pm** Greg Tchakmakjian, Ph.D.  
Daiya Cunnane, PsyD
  - a. Compliance, Privacy and Audit Services: Policy Updates
  - b. Test Call Script/Instructions
  - c. Cultural Competency Updates
    - i. Language Translation and Interpretation Services Policy (200.3)
  - d. QI Division Updates:
    - i. Quality Improvement Work Plan Goals CY 2019
    - ii. Clinical and Non-Clinical Performance Improvement Project Updates
    - iii. Front Office Customer Service Training – revised
- 4. **Quality Assurance: 3:00 pm to 4:00 pm**
  - a. Medi-Cal Certification Updates Joel Solis, RN
  - b. MR Grants or Audits (Notifications)
  - c. State DHCS Updates – System Review Committee
  - d. Training and Operations
    - i. Schedule of Trainings and Presentations
    - ii. Annual QA Report
    - iii. QA Knowledge Assessment Marc Borkheim
  - e. Policy and Technical Development
    - i. Access to Care/Network Adequacy Webinar: February 12, 2019
      - 1. Howard Washington: [hwashington@dmh.lacounty.gov](mailto:hwashington@dmh.lacounty.gov)
    - ii. Upcoming Assessment Form changes
    - iii. Psychological Testing Procedure Code (**DRAFT**)
    - iv. Policy 302.03 – Care Coordination
    - v. Policy 401.01 – Clinical Records Maintenance

**Next Quality Improvement/Quality Assurance Meeting  
March 19, 2019 –Gus Velasco Center, Santa Fe Springs**

Greg Tchakmakjian Ph.D.- Chair	(213) 639-6733	gtchakmakjian@dmh.lacounty.gov
Caesar Moreno, LCSW – Co Chair	(562) 692-3333 x 236	cmoreno@thewholechild.info
Susan Lam, LMFT, PPSC – Co Chair	(323) 526-3333 x 217	susanl@almafamilyservices.org

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

<b>Type of Meeting:</b>	<b>SA 7 QIC</b>	<b>Date:</b>	<b>2/19/19</b>	
<b>Place:</b>	<b>Gus Velasco Neighborhood Center 9255 S. Pioneer Blvd. Santa Fe Springs, CA 90670</b>	<b>Start Time:</b>	<b>2:07 PM</b>	
<b>Chairpersons:</b>	<b>Greg Tchakmakjian (Co Chair) Caesar Moreno (Co-Chair) Rosa Diaz (Interim Co-Chair)</b>	<b>End Time:</b>	<b>3:30 PM</b>	
<b>Members Present:</b>	Rosa Diaz, Greg Tchakmakjian, Caesar Moreno, Danielle Kayne, Laura Solis, Hsiang-Ling Hsu, Wendy Mielke, Michael Olsen, Nicole Santamaria, Cheyla Bellamy, Jennifer Mitzner, Arlene Contreras, Irene Juaregui, Priscilla Gonzalez, Soledad Eo-Aguirre, Nikki Dorsey, Amanda Soto, Daiya Cunnane, Javier Nevarez, Annie Choe, Rosa Cornez, Cynthia Juarez, Linda Garcia, Gloria Guevara, Quenia Gonzalez, Brandon Parks, Denice Palacios, Amanda Monteingo, Elizabeth Hernandez, Adriana Guerrero, Beth Reisler, Gwen Lo, Elizabeth Echeverria			
<b>Agenda Item</b>	<b>Discussion and Findings</b>		<b>Decisions, Recommendations, Actions, &amp; Scheduled Tasks</b>	<b>Person Responsible</b>
<b>Welcome/Introductions</b>	Meeting was called to order at 2:07 PM		Introductions were made and new members welcomed,	Caesar Moreno
<b>Review &amp; Approval of Minutes</b>	Minutes from last meeting were reviewed for approval		Minutes approved by: Gwen Lo & Elizabeth Echeverria	





The importance of submitting outcome measures on a timely basis was noted in the review as well. In addition, it was noted that when providing mental health services and substance abuse services it is important to ensure that these two are separated and not mixed in billing.

It is recommended that providers review charts on a consistent basis.

**Annual QA Report**

Some agencies have not submitted their annual QA Report which was due January 31<sup>st</sup>; out of 130 providers selected to submit only 95 reports were received. Members were asked to submit if they have not submitted theirs yet.

**QA Knowledge Assessment**

Feedback was requested in regards to the Knowledge Assessment which DMH is working on.

It was explained that the purpose of surveys is not to be disciplinary and that instead it is intended to assess concepts and level of knowledge in order to learn where the gaps are and help design trainings and provide support. Survey should take 10-15 minutes to complete and would only include 10 questions. Pilot of survey may be up by May or June.

The level of which this survey would be conducted on was discussed. Some members expressed concerns related to the information obtained by surveys being later utilized negatively against providers and therefore highlighted preference for it to be anonymous.

**NACT:**

NACT should be updated in a monthly basis or more.

**Psychological Testing Procedure Codes (DRAFT)**

See *handout* draft of changes for Psychological & Neuropsychological testing procedure codes.

Greg Tchakmakjian

Caesar Moreno

Marc Borkheim

Greg Tchakmakjian

	<p><b>Policy 302.03- Care Coordination</b></p> <p>Client needs to be informed whom will be their primary contact person if they have any needs (much like SFPR policy) in order for them to know who to go to</p> <p><b>Policy 401.01- Clinical Records Maintenance</b></p> <p>Record retention time has been updated and is now 10 years.</p> <p><i>See handouts for more information on these policies.</i></p>		Greg Tchakmakjian
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<p><b>Adjournment</b></p>	<p>Meeting was adjourned at : 3:30 PM</p> <p>Respectfully Submitted,</p> <p>Rosa Diaz, LCSW SPA 7 QIC Interim Co-Chair</p>	<p><b>Next Meeting:</b></p> <p><b>March 19, 2019</b> <b>Gus Velasco Neighborhood Center</b> 9255 S. Pioneer Blvd, Santa Fe Springs, CA 90670</p>	
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