COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH

SA 8 QUALITY ASSURANCE/QUALITY IMPROVEMENT COMMITTEE
MEETING AGENDA
September 19, 2018
2:00 – 4:00 p.m.
Stars Behavioral Health Group
1501 Hughes Way, Ste 150
Long Beach, CA 90810

Co-chairs: Emily Ramos (LBMH), Michele Munde (Star View), Courtney Stephens (MHALA)
SA 8 QI/QA Liaison: Ann Lee

	QUALITY IMPROVEMENT (QI) MEETING 2:00-3:00 p.m.
1.	**Welcome/Introductions/Announcement**
2.	**Clinical Quality Improvement –** ➢ OMD Report Updates ➢ Feedback on Safety Intelligence
3.	**Language Interpretation Services for LEs/Contract Providers**
4.	**Patients' Rights Office Updates** ➢ **Change of Provider Logs –** 　○ Logs are due by the 10th of the following month. Please send directly to DMHCOP@dmh.lacounty.gov only. Do **NOT** email or copy the logs to Jose's individual email.
5.	**Cultural Competence Updates** ➢ Completion of Annual CC Training ➢ Tracking of Completed CC Training Reports ➢ CC Organizational Assessment Project
6.	**Compliance, Privacy, & Audit Services Bureau (CPAS) –** Policy Updates*
7.	**ACCESS Updates** ➢ **Data*** ➢ **SA 8 ACCESS Test Calls -** SA 8 made a total of 11 calls in Cambodian, Korean, Spanish, Vietnamese, and English. Thank you call volunteers!
8.	**PMRT Data**
9.	**QID Updates** ➢ QI Work Plan Goals Evaluation – CY 2017 & QI Work Plan 2018 Goals ➢ EQRO Review – Attendance for QIC Co-chairs (9/27/18) and PIPs session ➢ Timeliness Self-Assessment Survey

handouts

<u>**Next SA 8 QI Committee Meeting Info:**</u>
October 17, 2018, 2:00-3:00 p.m.
Location to be determined

COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH

SA 8 QUALITY ASSURANCE/QUALITY IMPROVEMENT COMMITTEE
MEETING AGENDA
September 19, 2018
2:00 – 4:00 p.m.
Stars Behavioral Health Group
1501 Hughes Way, Ste 150
Long Beach, CA 90810

Co-chairs: Emily Ramos (LBMH), Michele Munde (Star View), Courtney Stephens (MHALA)
SA 8 QI/QA Liaison: Ann Lee

	QUALITY ASSURANCE (QA) MEETING 3:00-4:00 p.m.
1.	**Welcome/Introductions/Announcements** • New Discipline Chief for Psychology started 9/14/18 – Jorge Partida, PsyD
2.	**Recent/Upcoming Audits & Reviews –** • MR Grant: The Guidance Center, July; LACGC in August; Para Los Ninos 8/24
3.	**Medi-Cal Certification Section –** For SA 8 sites, please contact Joel Solis. *SA 8 Lead: Joel Solis, (213) 251-6883 or jsolis@dmh.lacounty.gov*
4.	**State DHCS Updates –** no report
5.	**Training and Operations –** • Schedule of Trainings and Presentations* • Collaborative Documentation training for SA 8 D.O. clinics – 9/26/18 at 1pm, 2600 Redondo Ave, 6th Fl, Long Beach
6.	**Policy and Technical Development** • Network Adequacy Updates ○ Network Adequacy Certification Tool (NACT) open 9/14-9/26/18; immediate action required: update provider and practitioner information in NACT • Access to Care Webinar was held 9/11 for DOs and 9/12 for LEs • DRAFT Service Request Log Revisions* • Welcoming Groups: COS?
7.	**Health Information Management (HIM) Directly Operated ONLY -** None
8.	**Upcoming Items:** • *Updating Org Manual; ICC/IHBS/TFC* • *CFT Tracking Modifier*
9.	**Announcements**

<u>**Next SA 8 QA Committee Meeting Info:**</u>
October 17, 2018, 3:00-4:00 p.m.
Location to be determined

LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
SA 8 QUALITY IMPROVEMENT/QUALITY ASSURANCE (QI/QA) MEETING
Minutes, September 19, 2018

Type of Meeting	Service Area 8 Quality Improvement/Quality Assurance (QI/QA) Committee			Date September 19, 2018
Location	Stars Behavioral Health Group 1501 Hughes Way, Ste 150, Long Beach 90810		Start Time & End Time	2:00 – 4:00 p.m.
Co-chairs	**Co-Chairs:** Emily Ramos (LBMH), Michele Munde (Star View), Courtney Stephens (MHALA)			

DMH Representatives				
SA 8 QI/QA Liaison: Ann Lee	**QA Division Lead:** Robin Washington		**Medi-Cal Certification:** Joel Solis	

Members Present by Provider Name					
1736 FCC Demitri Richmond	**AADAP**	**Alafia** Paul Ha	**Alma Family Services** Rosa Diaz	**Aspiranet** Kim Kopenhaver	**Bayfront** Martin McDermott Sara Barakat
California Mentor	**Childnet** Anaissa Ibrahimi	**Children's Bureau** Martha Rivera	**Children's Institute Inc**	**City of Gardena**	**Coastal APIFMHC**
Community Representative Theodore Howlett	**Counseling4Kids** Kathleen Kim	**Crittenton**	**Didi Hirsch** Rashauna Fair	**Exodus** Jamie Chess	**For The Child**
Harbor-UCLA Harmandeep (Honey) Hira	**HealthView**	**Helpline Youth Counseling, Inc** Nicole Santemaria	**Heritage Clinic**	**Long Beach Adult** Emily Ramos	**Long Beach APIFMHC**
Long Beach Child & Adolescent Program	**Masada Homes** Linda Nakamura	**MHA** Courtney Stephens(co-chair) Susan Osborne	**MHUCC**	**Olive Crest** Jennifer Mitzer	**PACS** Kim Antonio
Personal Involvement Center Valencia Dunn	**San Pedro MHC** Kathleen Villagomez	**SB 82 MTT**	**Shields For Families** Patricia Carrillo Sara Dodd	**South Bay Children's Health Center** Daphne King	**South Bay MHC, FSP, Wellness Center** Cynthia Arias
Special Services for Groups (SSG-OTTP) Debra DeLeon	**Specialized Foster Care (Torrance)(Lakewood)** Della Clayburg Laia Vicens-Fuste	**SSG Alliance** Hala Masri	**Star View** Michele Munde (co-chair) Mayra Hernandez Stephanie Canales Jessie E. Marquez	**Tarzana** Quincy Singleton	**Telecare** Analia Barroso
Tessie Cleveland Alejandra Ramos	**The Guidance Center** Elva Gutierrez	**TIES For Families** Angela Lee			
Review of Minutes	June minutes are not yet completed. Will be emailed to members upon completion.				
Call to Order & Introductions	The meeting was called to order at 2:00 and attendees introduced themselves.				

QUALITY IMPROVEMENT (QI)			
Agenda Item & Presenter	**Discussion and Findings**	**Decisions/ and Recommendations Actions/Scheduled Task**	**Person Responsible/ Due Date**

QUALITY IMPROVEMENT	**Clinical QI Updates/Clinical Risk Management**
	• Safety Intelligence updates
	   ○ Contractors have converted to using the SI online reporting system. Some are still sending rpts via fax which Clinical Risk Management office has been rejecting.
	   ○ Working on updating the policy on event reporting.
	   ○ Asked in every provider has a C# now.
	   ○ There are a few lingering in the system - call the HelpDesk at 213-351-1335. Prioritize getting access to the SI system.
	Contacts:
	   ○ Doris Benosa Dbenosa@dmh.lacounty.gov or 213-351-6677
	   ○ Ly Ngo LyNgo@dmh.lacounty.gov or 213-351-6673
	   ○ Vanessa Jenkins VDinsayJenkins@dmh.lacounty.gov or 213-351-6676
	
	Language Interpretation Services for LE's/Contract Providers
	• No update
	
	Patients' Rights Office Updates – Reminded contract providers to submit logs by the 10th of every month to DMHCOP@dmh.lacounty.gov.
	
	Cultural Competency Updates
		Ann Lee will resend SI info	Ann Lee

Medi-Cal System Review will occur in February 2019 which will include items related to the Final Rule such as the annual cultural competence training and provider directory.

The CC unit will utilize the attestation forms to track completion of the annual CC training requirement. Copy of the form was included in the handouts. Providers need to work towards 100% staff completion (including executive management, administrative, front desk/clerical staff) and resubmit the attestation form when requirement is met. Still missing some attestations from providers. A list of attestations received by Provider Name will be sent out to the SA chiefs. DMH offers many trainings that meet the training requirement.

Compliance, Privacy, & Audit Services Bureau - Policy Updates
- The policy updates list was reviewed and included in the handouts
- New - Case Rate Services and Supports (CRSS) (L1)
- 307.01 Updated - Persons Authorized to Initiate Involuntary LPS Detention (L1,2)

ACCESS Updates
- ACCESS Center Calls report was discussed and included in the handouts.
- Tracking compliance with goal to answer at least 70% of calls within 1 minute.
- Routine appt for DHS clients coming through the reserved slots - need to be seen.
  - Reasons given - didn't bring Medi-Cal card (One allowable appt without M/C card); Not having guardianship/custody/court documents
  - Primarily adults referred through this appointment line
  - Goal: at least 85% of consumers referred for urgent appointment by Medi-Cal Managed care

Plans to Urgent Appointment Line at ACCESS Center will receive appointment for Specialty Mental Health Services (SMHS) Assessment within 5 business days.

- If unable to provide an appointment in timely manner, contact other clinics to inquire about their availability or SA navigator for assistance. Please note contacting the SA navigator does not take the responsibility off the provider to provide the client an appointment.
- Accessibility of Services - PMRT After Hours Response. Goal is 70% response within 1 hour of call. Did not make the goal (60%). Resources did not increase with increase in calls. Will continue to work on this goal.

SA 8 Access Test Calls – A total of 11 calls were made in Cambodian, Korean, Spanish, Vietnamese, and English. Thank you to all volunteers!

QID Updates
- Summary of CY 2017 and QI Work Plan 2018 goals
  - CY 2017: 19 of 20 goals met. Reviewed handout and discussed goals that were met.
    - Item I-1: Latino population in LA County decreased in the year. More consumers are reporting multiple races. Just started reporting 2 or more races.
    - Item I-2: API population - similar story - population decrease, but services steady, so goals met.
    - Item II-2: PMRT response time within 1 hour goal not met
  - CY 2018: new goal Item IV-1 Monitor prescription drug Prior Authorization (PA) requests in FY 17-18.

	• 2018 EQRO Timeliness Self-Assessment – handout was distributed and discussed **EQRO Review** – Michele, Courtney, Emily, or Ann will attend the session for QIC co-chairs on 9/27/19.			

QUALITY IMPROVEMENT (QI)			
Agenda Item & Presenter	**Discussion and Findings**	**Decisions/ and Recommendations Actions/Scheduled Task**	**Person Responsible/ Due Date**
QUALITY ASSURANCE	QA division is now under Quality and Risk Management Bureau along with the Contract Monitoring and Management Division (CMMD). Terri Boykins is the Deputy Director. CMMD monitors expenditures, quality of services, program expectations. QA is responsible for compliance with Medi-Cal rules and regulations, documentation, assessments, treatment plans, and progress notes. **Audits & Reviews** – See agenda **Medi-Cal Certifications** DMH does not want any late certifications. Will be contacting providers several months in advance to prepare for upcoming certifications. Currently preparing for System Review **Training and Operations** - See schedule of trainings and presentations which was included in the handouts and discussed. - Collaborative Documentation training for SA 8 D.O. clinics – 9/26/18 at 1pm, 2600 Redondo Ave, 6th Fl, Long Beach **Policy and Technical Development** Network Adequacy Updates – see handouts. - Network Adequacy Certification Tool (NACT) will be open from 9/14-9/26/18. Immediate action is required – Updates needed for Oct. upload by 9/24 for 10/1 - Fields added including email address, cultural competency, practitioner level (including ASW, LCSW, LPCC, APCC, AMFT), special populations		

served, areas of specialty (check boxes: ie, trauma, sexual orientation, homeless/housing, other, gender identity).

- Openings based on information you have at the time of completing form. Real time information system, real time staff changes. Keep up-to-date.
- Practitioner Level - whether they are accepting new beneficiaries. Will be defaulted to yes. Requirements are at the Practitioner, not team level.
- Importance of having systems to update staff and services in the NACT application.
- Adding field of cultural and competency capabilities with drop-down menus.

Access to care: Audio/video not out yet on webinar.
Contract providers were required to build SRL their EHR in order to submit SRL data to DMH online via web services.

Access to Care webinar as held on 9/11 for Directly Operated programs and 9/12 for Legal Entities. Webinar was recorded and will be posted on the QA website eventually.
Applies to outpatient MHS, MSS, CI and TCM - not residential services. We have to report initial request data to the state. We should not be denying requests for any services. Any request has to be logged even if it is not a service you provide. Be careful not to immediately turn them away because it does not sound like a request for mental health services.
- Screening and Triage: universal screening requests for initial requests (to determine timeliness of initial appointments). Triage required when client in distress, running out of medication or feel like they need to be seen sooner.
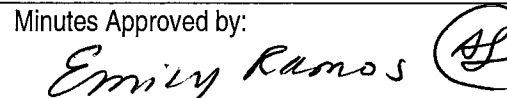
	- Every effort to provide initial meds appointment as initial assessment when med need identified (best practice) - Timeframe determined by date of request by client/legal rep or date client/legal rep expresses agreement for services (e.g., school referral) - Unable to service client then initial request shall be transferred using SRTS within 1 business day or you're able to get an appointment at another provider and give that to the client, don't need to use SRTS (SRTS if you can't give them a date/time). Using SRTS - make sure they can take the referral. - Provider's responsibility ends when you've completed the SRTS or provided them with an appointment date and time. - ACCESS urgent slots now called Priority		
Announcements	Ted Howlett read a poem titled "As You Proceed" written by Virginia Howlett. The next meeting will be held on October 17, 2018 from 2-4pm. Location to be determined. Will notify via email once the location is reserved.		

Minutes Recorded by:

Ann Lee, Ph.D., SA 8 QI/QA Liaison

Minutes Approved by:

Emily Ramos

Emily Ramos, L.C.S.W., DMH Co-chair