



OFFICE OF ADMINISTRATIVE OPERATIONS
 QUALITY, OUTCOMES, AND TRAINING DIVISION – QUALITY IMPROVEMENT UNIT
 COUNTYWIDE QUALITY IMPROVEMENT COUNCIL (QIC)

MEETING MINUTES
May 2023

Type of meeting:	Monthly QIC Meeting	Date:	May 15, 2023
Location:	Microsoft Teams	Start time:	9:30 AM
		End time:	10:50 AM
Recording:	https://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=10839		
Members Present:	See table below.		
Agenda Item	Discussion and Findings	Decisions, Recommendations, Actions, and/or Scheduled Tasks	Person(s) Responsible
I. Welcome and Introductions	Review of Minutes from the last meeting.	Dr. Kara Taguchi greets the Quality Improvement Committee (QIC) introduces the speakers and provides a brief overview on the meeting’s agenda items. The May 15, 2023, Countywide QIC Meeting Minutes were discussed and have been distributed, request for changes and/or recommendations can be emailed.	Dr. Taguchi
II. QI Updates	<ul style="list-style-type: none"> • CPS Updates • Q & A for Live 2023 Survey Period 	Dr. Cunnane provided updates on the Consumer Perception 2023 Surveys (CPS) The Paper and UCLA electronic survey tallies should be completed by Wednesday, May 24, 2023. The client caregiver reminder texts and emails have been turned off. The portal access will end June 1, 2023. Also, should you need assistance there is Consumer Perception	Dr. Cunnane

		<p>Survey (CPS) Technical assistance is available through the computer or mobile application. Please see attachment CPS 2023 updates 05.15.23.pdf.</p>	
<p>III. QA Updates</p>	<p>The QA Webpage which is located on the LACDMH public website.</p> <p>Payment reform.</p>	<p>Ms. N. Collier provided an overview on the Quality Assurance (QA) webpage stating that QA recommends accessing the Organizational Provider’s Manual and the Guide to Procedure Codes directly from the web page, so you are referencing the most updated and current information. QA has a chart review requirements page that has the most recent the most current chart review training video regarding the chart review process and reporting requirement related forms for both Directly Operated (DOs) and Legal Entities (LEs). In addition to training videos, QA has helpful handouts to reference, cheat sheets, clinical forms, and other handouts that are helpful for providers. Please see attachment May 2023 Countywide Council-QA Website Highlights & FYIs.pdf</p> <p>Ms. J. Hallman stated that QA is working on getting payment reform up and running. QA will be updating both the organizational providers manual and will be sending out an updated draft version of the guide to procedure codes later this week. QA is working on updating Integrated Behavioral Health Information System (IBIHS) to account for payment reform. QA also has the preauthorization changes that are coming July 1st.</p> <p>There’s a lot of misinformation related to payment reform, so we do want to be monitoring for the</p>	<p>N. Collier</p> <p>J. Hallman</p>

		<p>misinformation. Please refer questions regarding payment reform to Ms. J. Hallman and the QA Team. QA will be working on the cheat sheets for disciplines as well as a training video, that will not go out until the middle of June.</p>	
<p>IV. Presentation on Consumer Perception Survey (CPS) Results for 2022</p>		<p>Dr. M. Le presented the first portion of a series on the Consumer Perception Survey (CPS) results and data for 2022. Dr. Le stated that Los Angeles County (LAC) received a total of 7,297 surveys of those, 7,255 were completed. Dr. M. Le provided detailed information on the CPS surveys based on the common CPS items across the four age groups during the past five time periods.</p> <p>Please see attachment CPS 2022 QIC 5.15.23 .pdf</p>	<p>M. Le</p>
<p>V. Change of Provider Requests Data Report</p>	<p>Questions and Answers</p>	<p>T. Wilson from the Patients Right's Office (PRO) provided an update on the Requests to Change Provider Report DMH Policy 200.05 All Service Areas. More people are reporting change of providers which is good, some are still not reporting.</p> <p>H. Ditko asked if there is a list of other reports that PRO has to provide to the state.</p> <p>T. Wilson stated PRO does supply on a quarterly basis, information regarding ECT treatments throughout the county. Right now, there's about maybe 6 providers that are still doing ECT. Other information we get are from the hospitals, the urgent cares, some of the emergency rooms, IMD's, the PHFs, the MHRCs. having to do with involuntary holds. This is everything from the 72</p>	<p>T. Wilson</p>

		<p>hour hold all the way to the 180 day hold and we have to track that on a quarterly basis and report it to the state. There's also another report regarding denial rights. There are 8 rights that can be denied, and we also track seclusion, restraints, and the number of IMs that a person gets against their will. The state has recently changed some of the reporting requirements that need to be sent in, and we're working with providers and doing that as well. PRO received a notice from the state April 5th, 2023, saying they want us to make the information regarding quarter 3. Unfortunately, we weren't collecting that data for quarter 3 there was nothing to report because the date had not been collected. The information the state is looking for is a demographics for the patients, all patients that have been admitted, regardless if they're on a hold or they're voluntary there or the Lanterman Petri's Short Act (LPS) conservatorship also it's regardless of payment. So there to be Medi-cal, Medicare, Medi/Medi, third party payer, they can be cash payer, they can be uninsured doesn't matter. They want to know the demographics of these patients and it's 9 categories. This is something brand new for us to report and brand new for the Providers to provide us this information. The information was sent out to the different Providers last Friday. Please see attachment Change Of Provider Fiscal Year (FY) 22-23 Q3 Summary.pdf</p>	
<p>VI. Update on data from Re-hospitalization Pilot</p>	<p>Intensive Care Division TAR Unit</p>	<p>A. Preston from the Intensive Care Division Treatment Authorization Request (TAR) Unit presented the 30 Day Rehospitalization which was</p>	<p>A. Preston</p>

		<p>a six-month Pilot Program. A 30 (thirty) day readmission to psychiatric inpatient facilities can have a variety of impacts from impeding individuals within our communities' path to increase wellbeing healthcare costs disruption and community functioning. It's really a number to reduce nationwide. The average is close to 19% from a quarter three of 2021 to 2022 to Present. LAC averaged around 30% and we as a team looked at hospitals that had a combined rate of a 44% 30 day readmission rate. Their pilot goals were to focus on patients who had 4 or more hospitalizations within a year or had been hospitalized twice in the past 30 days.</p> <p>Mr. Preston stated we identified those who might be at a higher risk of a readmission. We also utilized our communication system with inpatient hospitals to relay information to identify these patients as well as to coordinate care, in reach, education, and support. This was a unique approach where our DMH Pharmacy Unit was able to provide consultations, medication, toolkits and do in reach to clients and patients on the unit and follow up post discharge to help with medication reconciliation at the outpatient clinics. Hospitals that we were working with showed a decrease in 30 day readmissions. This was a team effort, really led by the hospital to utilize these, different interventions and to team with the consumers to really create appropriate and long lasting discharge plans. Please see attachment for data and detailed information QI Re-admission – Short Orientation 5.15.23.pdf.</p>	
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VII. Service Area Updates		No updates.	SA QICs
Next Meeting:		June 12, 2023, from 9:30 to 10:30 a.m.	

NAME	AGENCY	DMH PROGRAM
Andrew Preston	DMH	Intensive Care Division TAR Unit
Angelica Fuentes	DMH	OCS South County Admin SA 5-8 & Countywide Specialty Programs.
Ann Lee	DMH	SA 8
Anthony V. Allen	DMH	
Armen Yekyazarian	DMH	Quality Assurance
Bradley Bryant	DMH	Quality Assurance
Brian Dow	DMH	Quality Assurance
Caesar Moreno	The Whole Child	SA7
Carmen Solis	Alma Family Services	SA 4
Daiya Cunnane	DMH	Quality Improvement
Emilia Ramos	DMH	SA 8
Gassia Ekizian	Foothill Family	SA 3
Greg Tchakmakjian	DMH	SA 7
Helena Ditko	DMH	Clinical Policy
James Coomes	DMH	SA 1
Jennifer Hallman	DMH	Quality Assurance
Kara Taguchi	DMH	Quality Improvement
Kimber Salvaggio	DMH	SA 2
Marc Borkheim	DMH	Quality Assurance
Margaret Faye	Sycamore	SA 3
Maria Moreno	DMH	SA 3
Michael D. Olsen	Enki Health Services, Inc.	SA 3, SA4, and SA 7
Michael Tredinnick	DMH	

Michele Munde	Star View Behavioral Health	SA 8
Michelle Rittel	DMH	SA 2
Misty Aronoff	Step Up on Second	SA 4-5
Myan Le	DMH	Quality Improvement
Nicole Gutman	DMH	SA 4
Nikki Collier	DMH	Quality Assurance
Patricia Lopez	DMH	Quality Assurance
Paul Arns	DMH	CIOB
Robin Washington	DMH	Quality Assurance
Rosalba Trias-Ruiz	DMH	SA 3
Shant Khachturian	DMH	Quality Assurance
Sidra Gifford	DMH	QOTD
Socorro Gertmenian	Wellnest LA	SA 4-7
Stephens Courtney	MHALA.ORG	
Theodore Wilson	DMH	Patients' Rights Office
Wanta Yu	DMH	Quality Assurance

Respectfully Submitted,

Dr. Kara Taguchi,