

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

MEETING MINUTES November 2023

Type of meeting:	Monthly QIC Meeting	Date:	November 20, 2023	
Location		Start time:	9:30 AM	
Location:	Microsoft Teams	End time:	10:50 AM	
Recording:	Countywide QI Council Meetin	g-20231120_090347-Meeting R	ecording - Nov 30th, 2	2023 (granicus.com)
Members Present:	See table below.			
Agenda Item	Discussion and Findings	Decisions, Recommendation and/or Scheduled Tasks	s, Actions,	Person(s) Responsible
I. Welcome and	Review of Minutes from the	Dr. Taguchi greets the Quality I	mprovement	Dr. Taguchi
Introductions	last meeting.	Council (QIC) introduces the sp provides a brief overview on the items. The Aug 21, 2023, Coun Minutes were discussed and ha request for changes, and/or red be emailed.	e meeting's agenda tywide QIC Meeting ave been distributed,	
		The Sept Countywide QIC meedue to illness and a low number and Oct's meeting was cancelled annual visit. We will be having a December to make up for those	r of agenda items, ed due to EQRO's a meeting in	

II Quality Improvement	- FODO Docar	Dr. Taguahi provided a recen on the External Overlity	Dr. Taguchi
II. Quality Improvement Updates	EQRO RecapQIC Restructuring	Dr. Taguchi provided a recap on the External Quality Review Organization's (EQRO) virtual visits to Service Areas (SA) 6 and SA 8 held during the month of October 2023. Consumer and family group participation in SA 6 was low, this was also an issue last year, and may have been due to the virtual environment.	Dr. Taguchi Dr. Cunnane
		SA 6 Consumer group participation	
		Adult group-8 people.TAY- 1 person.Caregiver group -2 people.	
		SA 8 Consumer group participation	
		Khmer speaking group-12 people.	
		Some of the feedback from the clients was that despite all the challenges that we continue to have with staffing and such, clients still felt well supported and felt well cared for by the staff. EQRO went as far as to caution staff to be aware of burnout. QI shared the All Programs of Excellence (APEX) Best Practices April to September 22, it covers points about staff care and development points on building morale and creating open and safe environments. Please see attachment Best Practices Handout October 2022.Pdf.	

V III. Introducing DMH's new Compliance Officer	Getting to know DMH's new Compliance Officer	Ms. Venezia Mojarro LAC Department of Mental Health's (DMH) new Compliance Officer, shared she has been with DMH for two months and is working with DMH Executives to help assess what the departmental needs are and determine what would best serve the department to put under Compliance directly. In the past there were functions like Auditing, Privacy, and policy under Compliance. Compliance usually handles or has in the past handled investigations that come through the Office of County Investigations (OCI) Unit out of the Auditor Controller's (AC) Office. Allegations and complaints that are usually the majority have to do with employees, but a lot of them also have to do with our contractors and so our Investigative Unit will investigate those. Ms. Mojarro has spent a lot of time meeting various managers and teams to assess, to understand and learn about functions, but also gather information and to figure out the nexus to compliance and look at and explore different opportunities for collaboration and support.	V. Mojarro
IV. Quality Assurance Updates	Knowledge Assessment Results	Ms. Collier discussed the Training and Operations Unit's name change to the Provider, Support & Review (PS&R) Unit, the change was to help make it clear what they do as part of the QA unit. Which includes QA focused training is different from the functions of the departments training unit. QA thought it might be helpful to highlight the kinds of support the Provider, Support, and Review does and provides to programs, so they put together a type of Frequently Asked Questions (FAQ) for the providers. The FAQ will be available to the	N. Collier

		program management, and they will share it with their staff. Please see attachment November 2023 Countywide QI Council-PS & R TEAM.pdf	
V. Patients' Rights Office	Update on Development of Electronic Submissions of Change Provider	Mr. Wilson from the Patients' Rights Office (PRO) shared that new Quarter Reports are coming out to the SAs. Also, PRO has received approval to move forward with developing a new online website for the providers to share their change of provider and information with PRO.	T. Wilson
VI. Cultural Competency Unit Anti-Racism, Diversity, and Inclusion Division Update	Cultural Competency Plan	Dr. Chang from Anti Racism, Diversity, and Inclusion Division (ARDI) shared the California Department of Health Care Services (DHCS) is revising the Cultural Competence Plan (CCP) requirements as we know them. From the new version of the CCP it's requiring a system wide view, bringing the different programs, units, divisions together to run those assessments and come up with a baseline. ARDI Division will then develop a 3-year plan with goals, objectives, and identifying gaps in service and proposed improvements. The new California DHCS requirement might be approved in Spring of 2024. Dr. Chang discussed the CCP, FY 21-22. Please see attachment 2023 CC Plan Report 11-20-23.	Dr. Chang
VI. Level of Care Update		Dr. Innes-Gomberg from Quality, Outcomes Training Division (QOTD) discussed the selection of the Level of Care Utilization Scale (LOCUS) to assess level of care in adult outpatient programs. The LOCUS is a tool to help clinicians navigate clients to right level of service and help individuals flow into and through the system. A level of care tool provides the system with a means to evaluate its capacity and effectiveness.	Dr. Innes- Gomberg

VII. Policy Update	Ms. Ditko discussed LACDMH Policy 1100.01 Quality Improvement Program, is a Level 2 Directly Operated and Contracted Policy. The policy is due for a 3 Year review in March 2024.	H. Ditko
	Dr. Taguchi shared an update on the Children's side, we are testing out structured decision models. We are hoping to pilot on that probably soon, maybe late Winter or early Spring and by piloting, looking at some of the clients that map based on scores into certain Levels of Care and work with some of the clinicians to see whether recommended level of care from tool resonates with them	Dr. Taguchi
	The LOCUS was developed by the American Academy of Community Psychiatry (AACP). AACP provides the training on the LOCUS, which is five hours online and is something that DMH will pay for every clinician, unlike the Child and Adolescent Needs and Strengths (CANS) where the clinician will have to get recertified every year, the LOCUS is one time. LACDMH Chief Information Office is in the process of finalizing our discussions with the ACCP and Deerfield Solutions. We hope to hear back from them in the next couple of days on this, then we will start to initiate a contract with ACCP and with Deerfield solutions. This is a fiscal year implementation, this will not be immediate. Please see attachment for detailed information, Adult Level of Care Tool Implementation Presentation pdf.	

VII. Service Area Updates	SA 1	Ms. Mize shared SA 1 will have their next QIC on Dec 11,2023 and will have monthly meetings from now on.	Ms. Mize
	SA 2	Ms. Rittel shared SA 2 will have their next meeting in Dec 203. Ms. Rittel will be out starting January 2024. Ms. Salvaggio will be hosting the meetings in January and March of 2024.	Ms. Rittel
	SA 3	Ms. Moreno shared SA 3 will have their next meeting on Jan 17, 2024.	Ms. Moreno
	SA 4	Ms. Solis shared SA 4 will their next QIC Mtg. on Nov 21, 2023, at 10:00 AM.	Ms. Solis
	SA 6	Ms. Gertmenian shared SA 6 was picked for the EQRO visit, their last meeting was in Oct 2023, they will go dark in Nov and Dec 23. They are hoping to get a Co- Chair for SA 6 and requested guidance in setting up the yearly calendar and meeting invites.	Ms. Gertmenian
		Dr. Taguchi will follow up with SA leadership for support regarding this issue.	
	SA 7	Dr. Tchakmakjian shared they will have their QIC MTG. Nov 21, 23 from 1:30 PM to 3:30 PM. Meeting is held every two months, their following meeting will be in February.	Dr. Tchakmakjian
	SA 8	Dr. Nakamura new Co chair for SA8 shared their next meeting will be held January 17, 2024.	Dr. Nakamura
	QI Staff and Recruitment	Dr. Taguchi informed the group that Dr. Lee resigned from county service and is no longer with QI. QI is in the process of recruiting for another clinical psychologist, and a QI manager. We are working on the 2022 CPS survey reports, trying to	Dr. Taguchi

	get through a lot of data and will try and get the provider reports out. We expect to get results of the 2023 surveys probably in the first quarter of the next calendar year.	

Next Meeting:

Dec 18, 2023, from 9:00 to 10:50 a.m.

NAME	AGENCY	DMH PROGRAM
Kara Taguchi	DMH	Quality Improvement
Alma Jimenez (DMHCDD)	DMH	Outcomes
Gassia Ekizian	Foothill Family	SA 3
Theodore W. Wilson	DMH	Patients' Rights Office
Daiya Cunnane	DMH	Quality Improvement
Gwendolyn Davis	DMH	SA 5
Caesar Moreno	The Whole Child	SA 7
Maria Moreno (CLESGV)	DMH	SA 3
Linda Nakamuro	Masada Homes	
Angelica Sanchez	DMH	SA 4
Sandra Chang	DMH	Cultural Competency Unit
Michelle Rittel	DMH	SA 2
Venezia Mojarro	DMH	Compliance Program
Yvonne Phung	DMH	Quality Assurance
Helena Ditko	DMH	Clinical Policy
Rosalba Trias-Ruiz	DMH	SA 3
Socorro Gertmenian	Wellnest LA	SA 6
Carmen Solis	Alma Family Services	SA 4
Nikki Collier	DMH	Quality Assurance
Greg Tchakmakjian	DMH	SA 7
Paul Arns	DMH	Chief Information Office Bureau
Makesha Jones-Chambers	DMH	SA 1
Shant Khachturian	DMH	Quality Assurance

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Armen Yekyazarian	DMH	Quality Assurance
Ly Ngo	DMH	Clinical Risk
Debbie Innes-Gomberg	DMH	QOTD
Marc Borkheim	DMH	Quality Assurance
Jennifer Mize	DMH	SA 1
Bradley Bryant	DMH	Quality Assurance
Emilia Ramos	DMH	SA 8
John Sheehe	DMH	Access Center

Respectfully Submitted,

Dr. Kara Taguchi,