



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

MEETING MINUTES  
March 2024

<b>Type of meeting:</b>	Monthly QIC Meeting	<b>Date:</b>	March 18, 2024
<b>Location:</b>	Microsoft Teams	<b>Start time:</b>	9:00 AM
		<b>End time:</b>	10:50 AM
<b>Recording:</b>	<a href="https://granicus.com/Countywide-QI-Council-Meeting-20240318-Mar-20th-2024">Countywide QI Council Meeting-20240318 - Mar 20th, 2024 (granicus.com)</a>		
<b>Members Present:</b>	See Table Below		
<b>Agenda Item</b>	<b>Discussion and Findings</b>	<b>Decisions, Recommendations, Actions, and/or Scheduled Tasks</b>	<b>Person(s) Responsible</b>
<b>I. Welcome and Introductions</b>	Review of Minutes from the Last Meeting	Dr. Taguchi greets the Quality Improvement Council (QIC), introduces the speakers, and provides a brief overview of the meeting Agenda items. She also shared meeting minutes from February 2024 for review and request for edits/corrections can be sent via email.	Dr. Kara Taguchi Stacey Smith
<b>II. Quality Improvement Updates</b>	2024 CPS update	Dr. Daiya Cunnane presented changes on the paper survey formatting. Effort to decrease number of pages and condense questions. The survey is a federal form. Updates include: <ul style="list-style-type: none"> <li>• Gender selection</li> <li>• Telehealth questions</li> <li>• Combined question for preferred language</li> </ul>	Dr. Daiya Cunnane

	<p>CalQIC 2024 Conference Overview</p>	<ul style="list-style-type: none"><li>• Youth, adult, and older adult added sexual orientation question</li><li>• Youth and Family- Question 27-29 has been moved to one box</li></ul> <p>Removed:</p> <ul style="list-style-type: none"><li>• Question that asked if anyone assisted when completing survey</li><li>• For older adult, primary reason why you became involved in this program</li></ul> <p>Dr. Taguchi mentioned LA County added SOGI data previously for the last two years, but these questions were not part of the Federal survey. Now that these have been added to the UCLA survey, DMH had to modify the survey to reflect UCLA's questions. Question posed: How can we increase our data collection for county of our size? Challenges include providing 2022 &amp; 2023 data back to providers in timely manner. We are trying to use training to clean up our data as this has been an issue with identifying providers. A reminder to update client demographics in IBHIS. Ideas to increase data capture can be discussed in next month's meeting.</p> <p>Follow up: Data from 2022 and 2023 CPS</p> <p>Please see attachment 2024 CPS Updates-Survey Changes 3.18.24 pdf</p> <p>Dr. Daiya Cunnane shared that CalQIC is an annual multi day statewide conference where QA and QI from different Counties convene. Conference includes shared data, ability to connect</p>	
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		<p>with different counties, and networking experience. Department of Health Care Services acknowledged implementation of CalAIM. They appreciate and were impressed with all the work that the Counties were doing. Each County presented their data and challenges. Highlights included link with Sherriff departments for incarcerated individual who are going to be released and eligible for Medi-Cal. Big interest to us is HEDIS measure follow up after hospitalization and follow up after emergency visit for mental health concerns. Important to share is consultant that did work with a couple of counties on FUA/FUM.</p> <p>Please see attachment CalQIC 2024 Conference Overview.pdf</p>	
<p><b>V III.</b></p>	<p>EQRO Findings and Plan</p>	<p>Jennifer Hallman discussed findings on EQRO Report for 2023 for LA County including recommendations for improvement during FY 2022-2023, key components that impact member outcomes, activity regarding PIPs, and member feedback obtained through focus groups.</p> <p>Mychi Davis presented on 6 findings, 2 of which were fully addressed and 4 partially addressed. Quality of care met all standards except for medication monitoring (partially met). CalEQRO felt that our monitoring process is not comprehensive enough and we are working on improving this. For IS findings, DMH partially met 2.</p> <p>Recommendations were for more data analytics positions to support the size of the system and improve electronic health record so legal entities</p>	<p>Jennifer Hallman and Mychi Davis</p>

		<p>can input directly into IBHIS. Clinical PIP rated high confidence, but Non-clinical PIP rated low confidence. Overall recommendations for improvement in Quality included Broaden system wide to reduce 7 and 30 days rehospitalization rates, consider more data analytic positions, and investigate issues that create barriers to collaborative charting and initiate solutions. Next steps include workgroups being assembled to address each recommendation.</p> <p>Jennifer Hallman added that herself and Michi Davis both presented at the Cultural Competency Committee last week and members felt that for the size of LA County there should have been a lot more participants in the focus groups for EQRO.</p> <p>Dr. Taguchi added a goal to for this year is to find ways to get more consumer feedback. Stacey Smith and Dr. Taguchi have been working on the quality improvement work plan.</p> <p>Please see attachment FY 2023-2024 EQRO Summary. pdf</p>	
<p><b>IV.</b></p>	<p>QA Updates</p>	<p>Nikki Collier shared observations from QA/QI reports received this year. Beginning of each year, providers are required to submit completed QA/QI reports. It helps indicate where providers might need support. As of mid-March, QA received reports from 90% of approximately 135 contract providers. Assistance will be provided regarding any barriers to those who have not yet submitted. QA/QI reports completed by April increased from</p>	<p>Nikki Collier</p>

		<p>75% in 2023 to 90% in 2024. Working on pilot of electronic version of the report to be more efficient and to gather and analyze easier.</p> <p>Dr. Brian Dow will refer to his team about the question posed to whether directly operated staff can claim for the time spent of QA activities.</p> <p>Please see attachment March 2024 Countywide QI Council-2024 Annual QA-QI Reports and Written Processes.pdf</p>	
<p><b>V. Service Area Updates</b></p>	<p>SA Updates</p> <p>SA 1</p> <p>SA 2</p> <p>SA 3</p> <p>SA 4</p>	<p>Patricia Lopez, QA Lead, will be leaving and retiring by end of this month. Dr. Armen Yekyazarian will be covering as interim.</p> <p>Appreciate the presentation from Dr. Christine Tanimura.</p> <p>Our next meeting is this Thursday at 10am. Ted Wilson will present on change of provider. Dr. Armen will be presenting. If Dr. Daiya Cunnane can present, I will also be discussing EQRO.</p> <p>We will be having our QIC meeting this Wednesday 3-20-2024 at 9:30AM. We will be recapping information from QA/QI information. Things are smooth here at SA 3.</p> <p>No updates at this time.</p>	<p>SA QIC Chairs and Co-chairs</p> <p>Nikki Collier</p> <p>Jennifer Mize</p> <p>Kimber Salvaggio</p> <p>Maria Moreno</p> <p>Nicole Gutman</p>

	SA 5	Last meeting was held at the end of February 2024. Next meeting will be end of May 2024.	Misty Aronoff
	SA 6	Our next meeting will be next Thursday.	Socorro Gertmenian
	SA 7	One of our co-chair Mr. Cesar Romero have left service for SA 7.	Greg Tchakmakjian
	SA 8	Our next meeting will be this Wednesday. Dr. Daiya Cunnane if able to present on CPS and CalQIC. Feedback from Cultural Competency Committee, we have not had any consumer attending our SA 8 meetings since the Client Activity Fund. Starting in September, QI meetings are no longer eligible for reimbursement, all our consumers stopped attending. We went from 3 participants to 0 participants.	Ann Lee
<b>VI. Open Forum</b>		No Comments.	SA QIC Chairs and co-chairs

<b>Next Meeting:</b>	April 15, 2024, from 9:00 AM to 10:50 AM
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NAME	AGENCY	DMH PROGRAM
Kara Taguchi	DMH	Outcomes & Quality Improvement
Stacey Anne Smith	DMH	Quality Improvement
Anna Galindo	The Whole Child	
Jennifer Hallman	DMH	Quality Assurance
Brian Dow	DMH	Quality Assurance
Susana Lutz	DMH	

Paul Arns	DMH	Chief Information Office Bureau
Venezia Mojarro	DMH	Compliance Program
Mychi Davis	DMH	Quality Assurance
Ann Lee	DMH	SA 8
Nicole Gutman	DMH	SA 4
Alicia Gonzalez	Foothill Family	
Volga Hovelian	DMH	Outcomes & Quality Improvement
Miguel Velasco-Ceja	CAL, State ELA EDU	
Moses Adegbola	DMH	Quality Improvement
Theodore W. Wilson	DMH	Patients' Rights Office
Daiya Cunnane	DMH	Quality Improvement
Gwendolyn Davis	DMH	SA 5
Maria Moreno (CLESGV)	DMH	SA 3
Linda Nakamura	Masada Homes	SA 8
Angelica Sanchez	DMH	SA 4
Sandra Chang	DMH	Cultural Competency Unit
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
Tonica Robinson	DMH	Peer Services
Nikki Collier	DMH	Quality Assurance
Greg Tchakmakjian	DMH	SA 7
Shant Khachturian	DMH	Quality Assurance
Armen Yekyazarian	DMH	Quality Assurance
Ly Ngo	DMH	Clinical Risk Management
Marc Borkheim	DMH	Quality Assurance
Jennifer Mize	DMH	SA 1
Bradley Bryant	DMH	Quality Assurance

Kimber Salvaggio	DMH	SA 2
Christina Nairn	DMH	SA 4
Margaret Faye	Sycamore	SA 3
Michael Olsen	Enki Health Services, Inc.	SA 3, SA 4, and SA 7
Misty Aronoff	Step Up on Second	SA 4-5
Robin Washington	DMH	Quality Assurance
Wanta Yu	DMH	Quality Assurance

Respectfully Submitted,

Dr. Kara Taguchi