



**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
 SERVICE AREA 4 QUALITY IMPROVEMENT COUNCIL (QIC) MEETING**

Date: 03/19/2024

Time: 10-11am

Type of meeting:	Virtual meeting	
Meeting Link:		
Members Present:	Carmen Solis Ana Ochoa Emma Mendez Rami Alrayes Janelle Dent Jennifer Rodriguez Flores Brenda Moreno Charles Spahn Cindy Rivas Michael Olsen Jonathan Figueroa Sandi Long Kimberly Guajardo Rebecca Fahey Jenny McKirdy-Corletto Beth Foster Nicole Gutman Dora Escalante Hilda Sandoval Jessica Estrada Grace Park	Alma Family Services Alma Family Services Amanecer Community Counseling Services Children's Hospital Los Angeles Children's Institute, Inc. Didi Hirsch Mental Health Services Dignity Health - California Behavioral Health Clinic DMH- Northeast Mental Health Center El Centro Del Pueblo Enki Health Services, Inc Exodus Recovery Inc. Gateways Gateways Hospital and MHC Gateways Percy Village GCAOP Hillsides Hollywood MHC Jewish Family Service JWC Institute, Inc Koreatown Youth & Community Center Kycc

	Wanta Yu Chris Lenik Leo Hernandez Jamie Campos Lisa Harvey Robin Moten Carmen Chacon Silvia Yan Renee Yu Misty Aronoff Alexis Orens LCSW Joanna Caysido Hope Kinney Angela Trenado Kellie Noyes Claudia Martinez	LA County DMH QA Optimist Optimist Youth Homes and Family Services Pacific Clinics Para Los Ninos SCHARP and Barbour and Floyd Medical Associates SSG SSG - Asian Pacific Counseling & Treatment Centers SSG Alliance Step Up on Second Telecare LA4 FSP & OCS The People Concern The People Concern United American Indian Involvement Wellnest Wellnest/TQM
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AGENDA ITEMS	DECISIONS AND ACTIONS	RESPONSIBLE UNIT/STAFF	DUE DATE
Introductions and Minute Review	We'll ask for folks to introduce themselves and their roles at their agencies so we can familiarize everyone with who's on the call at each coming meeting. Approved	Nicole Gutman	N/A
QI CPS 2024	Monday, May 20- Friday, May 204, 20024 -Training Dates to come	Nicole Gutman	N/A
QA Written Process and Reports	QualityAssusance@dmh.lacounty.gov wyu@dmh.lacounty.gov Wanta Yu, SPA 4 QA Liaison Practice Parameters	Wanta Yu	N/A

	<ul style="list-style-type: none"> • Policies Procedures and Parameters, to search information on LACDMH site regarding practice parameters for prescribers on how to monitor information for their clients <p>2024 QIC Annual QA/QI Report /Processes</p> <ul style="list-style-type: none"> • Purpose of gathering information for state to gather oversight information and informs LACDMH QA/QI plans • 90% of 135 contract providers have responded. • Observations shared: Performance Improvement projects have increased. Uncertainty as to whether same person performing QI as QA. Some materials/ forms were outdated. Few strong peer review process for psychiatrists and/or other prescribers <p>Ques: How does DMH provide Peer Review while maintaining standards of care and timely treatment? Wanta to bring question to QA</p>		
QA/QI Process Example	<p>Telecare- FSP & OCS SPA 4- Alexis Orens, LCSW Clinical Director aorens@telecarecopr.com 213-482-6400</p> <p>Founding and Philosophy & Mission QA Responsibilities</p> <ul style="list-style-type: none"> • Trained on Access to Care, SRTS is monitored by Clinical Director • Curriculum developed for staff during first month • Bi-weekly QI meetings, CalAIM office hours and EHR office hours • CPS- office staff assist with coordinating ad administering to member then data entered online and drop off paper surveys • Medi-cal Recertification, overseen by program administrator • Annual QA Report completed by Regional Director and meets with Clinical Directors to gather information. • Corporate Auditing once a year • Internal Auditing- staff audit intakes within 30 days and discharges within 30 days • Monthly Peer review utilizing Clinical Record Quality Review tool • Internal Competency evaluation form completed by supervisors for feedback on documentation and risk screening evaluation 	Alexis Orens	

	<ul style="list-style-type: none"> Comprehensive Audit Tool will be shared via email 								
QA Review Process	<p>New Quality Assurance (QA) Process</p> <p>Key Changes</p> <ul style="list-style-type: none"> Same process for DO and LE providers Data Analysis (previously not included for LE reviews) Pre-Chart Review Meeting Selection of Providers - small, medium, large based on # of clients they serve <table border="1" style="margin-left: 40px;"> <tr> <td style="text-align: center;">Agency A (large)</td> <td style="text-align: center;">Agency B (small)</td> <td style="text-align: center;">Agency C (large)</td> <td style="text-align: center;">Agency D (medium)</td> <td style="text-align: center;">Agency E (large)</td> <td style="text-align: center;">Agency F (small)</td> </tr> </table> <ul style="list-style-type: none"> QA unit begins Coordination->Official Notification-> Data pulled and shared ->pre-chart review meeting-> Chart review-> Post Review discussion->plan of support meeting if needed 	Agency A (large)	Agency B (small)	Agency C (large)	Agency D (medium)	Agency E (large)	Agency F (small)	Wanta Yu	N/A
Agency A (large)	Agency B (small)	Agency C (large)	Agency D (medium)	Agency E (large)	Agency F (small)				
Announcements, General Questions and Feedback	<p>Ques: Are agencies required to obtain lab work for all clients?</p> <p>-Wanta, referred to Practice Parameters in DMH website and will connect to Medical Director staff.</p>	All							

NEXT MEETING: April 16, 2024 at 10:00am