

**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
SA 5 Quality Improvement Committee
Minutes**

Type of Meeting	Quality Improvement Committee	Date:	May 30, 2023
Place	MS Teams	Start Time:	10:05 AM
Chair Co-Chair	Gwendolyn Davis, DMH Misty Aronoff, Step Up On Second	End Time:	11:07 AM
Members Present	Gwendolyn, DMH; Misty Aronoff, Step Up On Second; Marc Borkheim, DMH QA; Tora Miller, DMH Edelman (Child); Michelle Matthews, Edelman (Adult); Sherry Nourian, Vista Del Mar; Martha Andreani, Providence St. John's; Araceli Barajas, UCLA Ties for Families; Robert Nunez, Exceptional Children's Foundation; Mandy Sommers, St. Joseph Center; Kate McCauley, SHARE!; Renee Lee, QA – Medi-Cal Certification; Jorge Alfaro, Providence St. John's; Johanna Aguiluz, The People Concern; Heather Bowen, The Help Group; Kelly Delich, Family Service of Santa Monica / VDM; Didi Hirsch; Kayla Jones, The Help Group; Myan Le, DMH QI; Daiya Cunnane, DMH QI; Bethlehem Assefa, DMH SFC; Gail Gutierrez, Providence St. John's; Christine De La Cruz, DMH Cultural Competency; Terica Roberts, DMH CMMD; Clara Montes, DMH; Sara van Koningsveld, St. Joseph Center.		
Excused/Absent Members	David Tavlin, Step Up On Second; Kathy Shoemaker, Exodus Recovery; Kristi Rangel, Alcott Center; Nilsa Gallardo, Edelman – Adult; Angeline Loch, The People Concern; Lance Lenford, DMH; Aminah Ofumbi, Didi Hirsch; Anna Weber, Providence St. John's; Anthony Alvarado, DMH; Ashlei Sullivan, The People Concern; Audra Langley, UCLA TIES for Families; Blair Ibarra, Exodus; Brian Navarro, DMH; Caitlyn O'Hara, Alcott Center; Carlo Diaz, Edelman Child; Cheryl Carrington, Vista Del Mar; Claudia Angel, Exceptional Children's Foundation; Claudia Morales, PACS; David Kneip, Exodus; Elan Javanfard, Didi Hirsch; Evelyn Leonidas, Didi Hirsch; Filippo Forni, New Directions for Veterans; Hannah Bobrosky, New Directions for Veterans; Helen Mejia, The Help Group; Jacquelyn Wilcoxon, DMH; Jenny Escalante, The Help Group; Jesus Morales, Didi Hirsch; Karen Enyedy, The Help Group; Kristine Santoro, Didi Hirsch; LaCheryl Porter, St. Joseph Center; Lara Lewis, Edelman Child; Libby Hartigan, SHARE!; Linda Shing, Exceptional Children's Foundation; Marina Eckart, Didi Hirsch; Michele Burton, The Help Group; Michelle Burton, Registrar Recorder/County Clerk; Nicole Watson, DMH; Olga Zysman, The Help Group; Queta Allred, Didi Hirsch; Sandra Chang, DMH; Shanna Whitlow, Didi Hirsch; Sharon Greene, Providence St. John's; Stephanie Lamarche, DMH; Theodore Cannady, DMH; Tony Figueroa, PACS; Yanet Gonzalez, The People Concern.		

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<p>Call to Order & Introductions</p>	<p>The meeting was called to order at 10:05 AM. The meeting was conducted via MS Teams and telephone due to the Covid-19 pandemic. Participants were tracked via the MS Teams chat.</p>		<p>Gwendolyn & Misty QIC Membership</p>
<p>Agency Updates</p>	<p>*Martha Andreani, Provence St. John’s – current agency focus on CalAIM and billing *Christine De La Cruz, DMH Cultural Competency Unit – first time attending meeting. *Sherry Nourian, Vista Del Mar – agency is setting up MyEvolve, switching EHR, waiting on payment reform to do so. Working on CalAIM and payment reform. *Kelly Delich, Family Services of Santa Monica, a division of Vista Del Mar – same updates as Sherry Nourian. FSSM is without an intake coordinator at this time. *Mandy Sommers, St. Joseph Center – working on next month’s changes, waiting to update EXAM (EHR) for payment reform. *Robert Nunez, Exceptional Children’s Foundation – fully staffed. Gearing toward CalAIM.</p>		
<p>DMH Updates</p>	<p>No general DMH updates reported.</p>		

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<p>Quality Improvement</p> <p>Myan Le</p>	<p>Myan Le, DMH Quality Improvement Unit</p> <ul style="list-style-type: none"> • Spring 2023 CPS Week – Feedback and Debrief SA5 QIC CPS Selected Providers were engaged in a discussion regarding CPS survey administration week, 5/15/23 – 5/19/23. • Feedback included: there was a tight turn around for the hard copies to be delivered to the different SA sites, particularly for providers in multiple SAs. This was reported by multiple providers across the county. Co-chairs agreed that the turnaround time impacted their ability to review the surveys. This was reported by multiple providers across the county. UCLA had a quick turn around time and CW needed time to go through the surveys to make sure they were ready. CW noted that they had to make significant corrections on the surveys this year. Lastly, the preparation for CalAIM likely impacted the process as well. • Presentation and Discussion of Clinical and Non-clinical Performance Improvement Projects (PIPs) for the upcoming year. <ul style="list-style-type: none"> ○ This is annually State mandated and reviewed by EQRO (External Quality Review Organization). ○ Aim to improve outcomes over time for Medi-Cal beneficiaries. Demonstrate change at the client, provider, and Department levels. It is related to the intervention to direct treatment of consumers. 	<p>Providers were reminded to complete the online QI survey regarding the recent CPS administration (survey deadline 6/17/22).</p> <p>Suggestions and preparation for Clinical and Non-clinical PIPs, annual EQRO visit</p>	<p>SA5 CPS Selected Providers; QI</p> <p>DMH and Providers</p>
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<p>Quality Improvement (Cont.)</p> <p>Myan Le</p>	<ul style="list-style-type: none"> ○ There must be one indicator that measures clinical outcomes/impacts. ○ Non-clinical PIPs target administrative processes, responses, and satisfaction. They examine the problem, the causes and the interventions. ○ EQRO review is in October. ○ Clinical PIP considerations: 1. High volume, high-risk condition of the population served. 2. One contract site involve in the process and review. 3. Significant number of consumers involved. ○ Potential Clinical PIP for this coming year: 1. Maternal Mental Health (MMH). 2. LGBTQIAS-2. 3. Trauma-focused treatment in the Black/African American community. 3. Adult level of care tool. 4. Reducing rehospitalization rates in adults, child, and older adults. ○ Potential Child Clinical PIPs include: 1. Improved services for children with ADHD. 2. Reduce the number of rehospitalizations. Problem: 25% child rehospitalization rate in LA Co. compared to 19% nationwide. ○ LA County PIP: improve MMH services. Problem: 25% of mothers report depressed mood during and after birth. 		<p>DMH and Providers</p>

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<p>Quality Improvement (Cont.) Myan Le</p> <p>Quality Assurance Marc Borkheim</p>	<ul style="list-style-type: none"> ○ PIP: Improve trauma-focused treatment services to Black/African American consumers. Problem: Increased rate of trauma – LA Co. 21.9% in 2021, compared to 15.9 % nationwide. ○ 2021 – 2022 PIP: 1. Improve MAT. 2. Eating Disorders. Project will continue this year with the roll-out and implementation. • Bulletin 23-03, Updated in late March <ul style="list-style-type: none"> ○ Updates to the Medi-Cal Beneficiaries Handbook • CANS Webinar next month 6/22/2023, 10 – 11 AM • QA on the Air – 6/28/2023, 9 – 10 AM • Presentation on the availability of information on the DMH website on the available QA resources and how to access them. Link to the main site with navigation tabs to the left: Quality Assurance - Department of Mental Health (lacounty.gov) or www.dmh.lacounty.gov/qa/ 		<p>DMH and Providers</p> <p>Policy Bulletin review division</p> <p>Providers</p>

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<p>Quality Assurance (Cont.)</p> <p>Medi-Cal Certification Renee Lee</p>	<ul style="list-style-type: none"> ○ Webinars are archived on the website ○ There are general contacts for the QA Department <ul style="list-style-type: none"> • Payment reform CPT codes (draft) were reviewed last week on QA on the Air • Access to Care: all providers need to assist in improving the entire County's Access to Care. CMMD has to be consulted before you can no longer accept any referrals. • Updates to Medi-Cal Certification <ul style="list-style-type: none"> ○ Fire clearance requirements for Medi-Cal Certification: every time you had a new provider or for the tri-annual certification, fire clearance is required. ○ Please do not provide to FD a standard form. If the inspector asks for an 850 form, get their contact information, name, phone number, and email. Contact your Medi-Cal Certification liaison so they can work with the inspector. ○ Contact local FD for fire safety inspection. For a MH provider providing outpatient services, it is a state requirement to provide fire clearance. It just means that the building is deemed safe for both staff and consumers. ○ Bulletin is on QA website regarding med-certification. ○ Medi-Cal Certification liaison will reach out ten months 		<p>Providers</p> <p>Providers</p>

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<p>Medi-Cal Certification (Cont.)</p> <p>Misty Arnoff Step Up on Second</p>	<p>in advance because of the fire safety inspection. They keep track certifications in order to be on top of it as well.</p> <ul style="list-style-type: none"> • 1135 Waiver – Renee is speaking directly to DO and contract agencies and reached out regarding outstanding documents submitted under the waiver. <ul style="list-style-type: none"> ○ State has concluded the waiver as of May 7th or 11th. <p>The state is coming out going down the list of providers certified or had address changes or added full-scope Medi-Cal support services during the waiver. There is very short notice of visits. Must update certain policies and prepare for site visits.</p> <ul style="list-style-type: none"> • SUOS has a new WLA site for Daniel’s Place on Overland between Venice/Palms. • The next Service Area 5 Quality Improvement Committee Meeting will be held on Tuesday, August 29, 2023 via MS Teams. 		<p>Providers</p> <p>Gwendolyn and Misty QIC Membership</p>

Respectfully Submitted,

Gwendolyn Davis, LCSW (Co-Chair)