



**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
SERVICE AREA 1 QUALITY IMPROVEMENT COUNCIL (QIC) MEETING**

Date 06/24/24
Time: 1:00-2:00 pm

Type of meeting:	Virtual Microsoft TEAMS
Meeting Link:	https://teams.microsoft.com/l/meetup-join/19%3ameeting_NDAwNTdhM2UtMDQ2MC00YTVmLWEyMjYtZmY1Y2YyYWNjNjky%40thread.v2/0?context=%7b%22Tid%22%3a%2207597248-ea38-451b-8abe-a638eddbac81%22%2c%22Oid%22%3a%224e6a9690-3822-4660-a219-e811568691e3%22%7d
Members Present:	<p>See table below</p> <p>Jennifer Mize Service Area 1 QIC Chair , Daiya Cunnane DMH QI, Vi Nguyen. Sycamores, Catrina Rodriguez with Penny Lane Centers, Amber Anderson, AVMHC, James Coomes, Maral Arakelian, LMFT: Optimist Youth Homes, Esmeralda Puente, CCAV, Kimber Salvaggio - DMH SA 2, Jaime Nunnenkamp, MHALA, Cindy Ferguson SA 1 Administration, Armen Yekyazarian, LACDMH QA, ZOE Home for Youth STRTP, Keshia Humphrey, CCAV, Norma Cuenca. Optimist, Deborah Hansen, High Desert Medical Hub, Stephanie Ochoa, StarView Brittany White, Personal Involvement Center</p>

AGENDA ITEMS	DISCUSSIONS/RECOMMENDATIONS/ACTIONS OR SCHEDULED TASKS	RESPONSIBLE UNIT/STAFF	DUE DATE
Introductions	Attendance: Name and Name of organization, Minutes approval.	All providers	
QA/QI Monthly meeting Recap	<ul style="list-style-type: none"> • How to Handle CANS assessment from DCFS • Last Cans training Clinical Utility for Supervisors is Aug 6th • New Portal for Filing grievances/Appeals • New QA Review Process Schedule • Change Of Provider Portal Go Live • DMH and SAPC Call Center Integration • Payment Error Rate Measurement Audits • LA General Outpatient Clinic Closure • 	QIC Chair/Jennifer Mize	
QI Monthly Meeting Recap	<ul style="list-style-type: none"> • DHCS Quality Measures • HEDIS • SB 1291 • QIC Purpose/Possible Restructuring 	QIC Chair/Jennifer Mize	Ongoing
QA Updates	<ul style="list-style-type: none"> • Collaborative Documentation Education • https://lacountymediahost.granicus.com/MediaPlayer.php?clip_id=11087 • GUIDANCE FOR CLINICS IMPLEMENTING COLLABORATIVE DOCUMENTATION <ul style="list-style-type: none"> ○ Follow-up Guidelines for Clinics-Post-Training follow-up strategies for clinics/programs ○ Quick-Start Steps for Clinicians-Post-Training quick-start strategies for practitioners ○ Questionnaire to Assess Clinic Implementation Status–Survey to assist with evaluating a clinic/program’s status of implementation • GENERAL RESOURCE MATERIALS FOR COLLABORATIVE DOCUMENTATION 	Armen Yekyazarian, Psy.D.	Ongoing

	<ul style="list-style-type: none"> ○ Pilot and Roll-Out of Collaborative Documentation for Directly Operated Clinics—the process for implementation of Collaborative Documentation for directly operated providers from 2016 -2019 ○ Collaborative Documentation Guidelines Manual—Explains the Collaborative Documentation process and provides guidance for implementation 		
QI Updates	<ul style="list-style-type: none"> • Thank You to all the Participants and Team to help put together the CPS Survey • Client Family Satisfaction Workplan Goal 2024 • Preliminary CPS Counts • UCLA electronic survey: 1,541 (+22) • LACDMH electronic survey: 4,110 (+578) • 21,860 (+2,739) surveys sent, 18.8% response rate • MyHealthPointe Pilot: 24 • 179 surveys sent, 13.4% response rate • Paper surveys: 5,070 (+213) • Total: 10,747 • The QI unit is developing a plan to: <ul style="list-style-type: none"> • Identify providers who did not participate in the CPS period • Offer support and problem solve to increase participation 	Daiya Cunnane Psy.D	Ongoing
Access To Care Reminders	<ul style="list-style-type: none"> • Do not refuse clients outside your service area • Providers cannot have a blanket policy in which the provision of one service is dependent on another • SRTS/SRL Education • Medication Services • Jail discharge planner workflow • NAPPA Education/Reminders • 	QIC Chair/ Jennifer Mize	Ongoing

Open Discussion For QIC Members	Open discussion	All Providers	Ongoing

Respectfully Submitted by:

Jennifer Mize RN

SA 1 Adult QIC Chair

NEXT MEETING: Date July 22nd Time 1:00 pm-2:00pm