

	<p>Improvement and Care Coordination. Our self-assessment is due at the end of September. NCQA will validate our results and they will communicate them to DHCS. QI will be the lead to find evidence for the assessment and form a committee. This project empowers various aspects of QI and utilizes data to improve services. Evidence-based practices are part of evidencing we have a strong network of care.</p> <p>Please refer to attachment MBHO Standards Analysis Final.PDF</p>	<p>Stacey Smith stated we are excited on how this assessment will show us where the possibilities are to improve our system.</p>	
<p>III. CPS Survey 2024 & CPS Work Plan Goal 2024 Updates</p>	<p>Dr. Daiya Cunnane presented an update on Consumer Perception Surveys (CPS). She thanked everyone who participated and contributed this year. There was a good number of comments this year and some people reported not having enough space to enter them on comment report. It was suggested to use an additional entry for longer comments. Everyone was asked to complete the CPS feedback survey so we can identify areas where we can improve the survey next year.</p> <p>June 14,2024 was the deadline for the open-ended comment report for the surveys, but it is extended to end of this week. Link is provided on Teams chat with QR Code.</p>	<p>Michelle Rittel shared feedback from her service area (SA) Directly Operated (DO) program. They requested to not do electronic surveys at all next year unless it is a virtual visit due to response rate being low.</p> <p>Alicia Gonzalez shared feedback that preparing clients with all information for reporting unit and client ID is a barrier to using QR code for UCLA's survey.</p> <p>Dr. Taguchi discussed CIOB might have a way that the link can go back to the provider.</p> <p>Dr. Cunnane agreed that especially with UCLA surveys we must provide the client with additional information.</p>	<p>Dr. Daiya Cunnane</p>

	<p>Dr. Cunnane presented on Consumer Perception Satisfaction Workplan Goal for 2024 and discussed the following:</p> <ul style="list-style-type: none">➤ Increase data collection of Sexual Orientation and Gender Identity (SOGI) data was completed and demographics were included in survey this year.➤ Continuing to roll out Power BI to evaluate and report out Provider Level reports.➤ Pilot surveys being accessible in My Health 2.0 at Rio Hondo DO was successful and may expand to other clinics next year.➤ Include Peer Services division in promoting CPS was initiated and they are a valuable partner.➤ Develop promotional materials for CPS to increase participation is still being worked on. <p>Please refer to attachment CPS 2024 and Work Plan Goal Updates.PDF</p>	<p>QI asked if there was and feedback regarding the Spanish translation for surveys this year. No comments/feedback were received by committee members.</p> <p>We will be seeking feedback from Peer Services Division on CPS and how we can involve them in next year's planning.</p> <p>We would like to identify additional clinics to pilot My Health Pointe 2.0 for the surveys next year.</p>	
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IV. Restructuring QIC Design	<p>Stacey Smith shared reasons for the restructuring. There were 6 core problems identified regarding QIC meeting structure. From all the feedback received both QA and QI decided that it is best for information to be disseminated from centralized QA and QI meetings. Regional QIC North will include Service Areas 1 through 4 and Regional QIC South will include Service Areas 5 through 8. Contract revision has been completed and SA District Chiefs are aware of the plan. The QI policy has been updated to reflect Regional QIC but has not yet been submitted.</p> <p>Please refer to attachment Restructuring QIC PowerPoint CW QIC 6-17-2024.PDF</p>	<p>Dr. Taguchi discussed importance of the restructure and trial. If the restructure doesn't work, either move on to find resolution or go back to same meeting format. The main goal is getting more accurate information and feedback without losing the quality.</p> <p>Concerns from SA chairs discussed included:</p> <ul style="list-style-type: none">➤ During SA QIC meetings, majority of the time it is silent, and no feedback is received making it challenging whether the information shared is helpful or not.➤ Transitioning to bigger Regional meetings may impact participants who are already shy/intimidated to voice concerns and feedback. <p>Dr. Franco shared from her previous department that prior to meetings they offered a 30-minute pre-meet where providers could ask questions without the department present, and a representative could pose questions/ concerns during official meeting.</p>	Stacey Anne Smith
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		<p>Courtney Stephen stated that they stop the recording in their SA QIC meetings towards the end for open discussion. It helps and they found attendees were more comfortable discussing issues without being recorded.</p>	
<p>V. Peer Services</p>	<p>Dr. Robinson shared the seven Peer Service objectives and progress towards them for Work Plan Goal 2024.</p> <ul style="list-style-type: none"> ➤ DMH will cover costs for training, exam, exam retake, and recertification starting in August 2024. Our department Director approved Peer Specialist items and we are now working with HR to add items to the department. ➤ Job duty statement was created for Peer Specialists. ➤ Starting July 1st approval of \$225 bonus paid for Community Health Worker, Mental Health Advocate, Senior Community Health Worker, and Supervising Community Health Workers who are certified as peer support specialists. Staff may not get the paid exactly this date but will be retroactive. ➤ We are looking to increase the number of Senior Community Health workers in our Peer Resource Center. ➤ We are still working on the funding in developing internship program (hoping to start September) as a pathway to employment as a Peer Specialist. We 	<p>Dr. Robinson stated an electronic handbook and information about Peers, their job duties and who they are will be created.</p> <p>The committee thanked Dr. Robinson for all the advocacy and hard work she has done for Peers.</p>	<p>Dr. Tonica Robinson</p>

	<p>are thankful for the volunteers and have a pathway to employment for those who are interested.</p> <ul style="list-style-type: none"> ➤ Creating survey for Community Health Workers to complete and get feedback to measure improvement. ➤ We are working on a plan and with UCLA where everyone in our department is knowledgeable about what the duties of Peers are. Our goal is to get different tracks for different roles. 		
<p>VI. QA Updates</p>	<p>Nikki Collier discussed Collaborative Documentation. FY 2023-2024 EQRO Review found that some new clinical line staff had difficulty with collaborative charting while in session. EQRO recommendations related to this observation are looking at the issues that are creating barriers for practitioners. On the QA website a training link is available for collaborative documentation. If there are any questions, please reach out to the QA mailbox.</p> <p>There is Collaborative Documentation resource page on QA website that contains guidance and tools for clinics and programs.</p> <p>Please refer to attachment June 2024 Countywide QI Council-Collaborative Documentation Resources.PDF</p>	<p>Training video on Collaborative Documentation for Youth and Children will hopefully be available sometime in the late summer.</p>	<p>Nikki Collier</p>
<p>VII. Service Area Updates (below):</p>			
<p>SA 1</p>	<p>No updates.</p>	<p>Next meeting Monday at 1pm.</p>	<p>Jennifer Mize</p>

SA 2	Meeting held in May.		Michelle Rittel
SA 3	Meeting held on May 15 th .	Next meeting will be July 17 th .	Maria Moreno
SA 4	No representative present.		
SA 5	No representative present.		
SA 6	No representative present.		
SA 7	No representative present.		
SA 8	Last month the meeting focused on surveys and discussion regarding feedback. Overall returned surveys were good.	Next meeting will be July 17 th .	Courtney Stephen

Next Meeting:	July 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
Daiya Cunnane	DMH	Quality Improvement
Rosa Franco	DMH	Quality Improvement
Moses Adegbola	DMH	Quality Improvement
Laarnih De La Cruz	DMH	Quality Improvement
Volga Hovelian	DMH	Outcomes & Quality Improvement
Michael Olsen	Enki Health Services, Inc.	Enki Health Services, Inc.
Michelle Rittel	DMH	SA 2
Debbie Innes-Gomberg	DMH	QOTD
Angelica Sanchez Enriquez	DMH	Downtown Mental Health, SA 4
Kimber Salvaggio	DMH	SA 2
Wanta Yu	DMH	Quality Assurance

Tonica Robinson	DMH	Peer Services
Theodore W. Wilson	DMH	Patients' Rights Office
Maria Moreno (CLESGV)	DMH	SA 3
Mandy Woo	DMH	SA 7
Susana Lutz	DMH	Downtown Mental Health, SA 4
Armen Yekyazarian	DMH	Quality Assurance
Rosalba Trias-Ruiz	DMH	SA 3
Linda Nakamura	Masada Homes	SA 8
Sandra Chang	DMH	Cultural Competency Unit
Courtney Stephen	MHALA.ORG	SA 8
Jennifer Mize	DMH	SA 1
Alicia Gonzalez	Foothill Family	SA 3
Anna Galindo	The Whole Child	SA 7
Jennifer Hallman	DMH	Quality Assurance

Respectfully Submitted,

Dr. Kara Taguchi