

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

MEETING MINUTES
August 2024

Type of meeting:	Monthly QIC Meeting	Date:	August 19, 2024
Location:	Microsoft Teams	Start time:	9:00 AM
		End time:	10:50 AM
Recording:	Countywide QI Council Meeting-20240819 - Sep 9th, 2024 (granicus.com)		
Members Present:	See Table Below		
Agenda Item	Presentation and Findings	Discussion, Recommendations, and/or Needed Actions	Person(s) Responsible
I. Welcome and Introductions	Dr. Kara Taguchi welcomed everyone. Minutes from the last meeting were emailed.	If there are any edits/additions needed to minutes, please email them to DMH QI mailbox.	Dr. Kara Taguchi & Stacey Smith
II. Quality Improvement Updates <ul style="list-style-type: none"> Consumer Beneficiary Report 2023/ Alt Text 	Dr. Cunnane discussed the experience of using Alt Text for the first time while finalizing QI's Consumer Beneficiary Report 2023. Alt text is a feature available in Word and PDF documents that assists readers with visual impairments. QI will be starting to use Alt Text when checking for accessibility of reports and encouraged others to start checking documents for accessibility and using Alt Text as indicated.	Dr. Agarwal shared his experiences of creating and using Alt Text. Dr. Taguchi and Stacey Smith discussed the importance especially that QI responsibility makes reports accessible to everyone both internal to DMH staff and externally to the public.	Dr. Daiya Cunnane & Dr. Anshu Agarwal
III. National Committee for Quality Assurance (NCQA) Managed	Stacey Smith presented slides on the NCQA MBHO self- assessment that is on target to be completed by September 30 th , 2024. MBHO	Kimber Salvaggio shared that SA 2 QIC meeting attendees are vocal about their concerns on policy and	Stacey Smith

[Type here]

<p>Behavioral Healthcare Organization (MBHO)- QIC Requirements & Discussion</p>	<p>standards for QICs were presented that include recommending policy decisions, analyzing and evaluating QI activities, ensuring practitioner participation, identifying needed actions, and ensuring follow-up. QI's self- assessment of these standards was discussed, and a question was posed to the committee if we are in fact completing these tasks in our CW and SA QICs and if so if these efforts are documented in our minutes.</p> <p>Please see attachment MBHO Standards Analysis Final.PDF</p>	<p>share important information. Practitioner participation can be a challenge and can be improved. We are always following up, but time is a challenge. We do not include names of who discussed what when doing the minutes.</p> <p>Nicole Gutman, SA 4, shared that for their QIC meetings, they find it helpful to have prompts for discussion and questions for providers to participate.</p> <p>Socorro Gertmenian, SA 6, shared that from her QIC meetings especially after July 2024 when so many changes occurred that they mainly discuss questions, struggles, and need for clarification. Follow up is very important although it is challenge.</p> <p>Dr. Taguchi shared that everything that we are doing should be providing service with high quality. We try to avoid overlapping meetings and repetition.</p> <p>Jennifer Hallman stated the focus on centralizing answers being given from DMH, so everyone receives the same message.</p>	
--	---	--	--

		<p>Nikki Collier shared that the transition to Regional QIC meetings will allow attendees to get used to this shift of receiving messages centrally.</p>	
<p>IV. Clinical and Non-clinical Performance Improvement Projects (PIP) Work Plan Goals 2024 Update</p>	<p>Dr. Cunnane shared slides on updates on QI's Clinical and Non-Clinical PIPs. The 2024 Clinical PIP on improving the rate of 30-day and same site rehospitalization for 2 inpatient hospitals was discussed including barriers in communication due to staff overturn and data that is still pending. A question was posed if the committee thinks this PIP should continue in CY 2025 due to its challenges.</p> <p>Non-clinical PIP on improving follow-up for mental health services after emergency department (ED) visits for mental illness (FUM) was discussed including data that is still pending and issues with unreported demographics. The GENESIS team has been receiving alerts from PointClickCare (PCC) when an enrolled client enters the ED. For GENESIS data April 2024 to August 2024 most of the alerts were medical. There were 13 ED visits that included Mental Health diagnoses. The majority were female with an average age of 74 years old, and primary language English. Most of the alerts were from SA 2 and SA 7. Most common diagnoses by type were Mood and Anxiety Disorders. We are still working on finding baseline data, but it will be available soon.</p>	<p>Nicole Gutman asked what is counted as a follow up for FUM?</p> <p>Dr. Cunnane responded it can be connection with primary care but more focused on the Mental Health visits.</p> <p>Nicole Gutman shared her experience at an adult mental health clinic where they received a lot of the referrals, but they had a high no show rate either because clients said they did not know they had an appointment, or they declined the service.</p> <p>Dr. Franco shared that there is a lot of challenges faced whether it's staff turnover, information being unable to be shared with us from the hospital site, or the referral process wasn't clear.</p>	<p>Dr. Daiya Cunnane & Dr. Rosa Franco</p>

	<p>Please see attachment FY 23-2024 PIP Update 08.19.24.PDF</p>		
<p>V. Q2 Published Quarterly Policies</p>	<p>Helena Ditko shared update on Policy Bulletin for July 1st, 2024. Blood pressure monitoring will be included with new policy In-Clinic Vital Signs Monitoring and Assessment. Additional new parameters include Street Psychiatry and Field Based Service Delivery and Enriched Residential Care Resources. Revisions include Antidepressants Medications, Advanced Health Care Directives, Language Translation and Interpreter Services, Clinical Termination of Mental Health Services, Revenue Management Policy and Procedure Manual, Reporting Overpayments Resulting from Waste, Fraud, and Abuse, Short Doyle/Medi-Cal Organization Provider's Manual. There were a lot of significant changes for Policy 312.01.</p> <p>Please see attachment Policy Bulletin Q2-2024.PDF</p>	<p>Reminder to please review Policy 312.01.</p>	<p>Helena Ditko</p>
<p>VI. Needs Assessment Data</p>	<p>**Will be discussed at next month's Countywide QI Committee meeting due to lack of time today.</p>		<p>Stacey Smith</p>

<p>VII. QA Update</p>	<p>Nikki Collier shared presentation slides regarding the new QA Review Process. Key changes include the way we review DO versus Contract Provider in terms of aligning how we notify them, general workflow, the forms we use, and what we focus on. QA Review conducted new process February 2024 and as of August 2024 our unit fully completed reviews of 4 providers (2 DO and 2 LE) representing 27 providers sites, pending completion include 6 others representing 40 provider sites. We are tracking post review action steps and follow up reviews. Feedback survey is included and shared a link to the post review survey. Observations include data review is informative and helpful, providers accepting review results, been cooperative and following through. Room for improvement includes problem list and progress notes. Our next step is to plan to continue developing data analysis aspect to focus on service provision and program comparison and expanding review teams.</p> <p>Please see attachment August 2024 Countywide QI Council-How the new QA Review Process is Going.PDF</p>		<p>Nikki Collier</p>
<p>VIII. Service Area Updates (below):</p>			

SA 1	No updates reported.		Jennifer Mize
SA 2	Last meeting was last week. Next meeting will be September 19, 2024.		Michelle Rittel
SA 3	Last QIC meeting was on July 17 th . Next meeting will be September 18, 2024. We are getting a lot of questions regarding payment reform.		Maria Moreno
SA 4	Last meeting was June 18 th and we will be meeting tomorrow.		Nicole Gutman
SA 5	Our next meeting will be August 27 th and we will have a QI presentation.		Misty Aronoff
SA 6	We had a Q&A and discussed how providers are handling things. Space for attendees to digest everything.		Socorro Gertmenian
SA 7	We have our next meeting tomorrow at 1:30pm.		Carmen Solis
SA 8	Last meeting was on July 17 th and our next meeting is on August 21 st .		Linda Nakamura

Next Meeting:	October 21, 2024, from 9:00 AM to 10:50 AM
----------------------	--

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
Kimber Salvaggio	DMH	SA 2
Maria Moreno (CLESGV)	DMH	SA 3

Armen Yekyazarian	DMH	Quality Assurance
Rosalba Trias-Ruiz	DMH	SA 3
Linda Nakamura	Masada Homes	SA 8
Wanta Yu	DMH	Quality Assurance
Alben Zatarian	Enki Health Services	SA 3, 4, 7
Margaret Faye	Sycamores	SA 3
Ann Lee	DMH	SA 8
Socorro Gertmenian	Wellnest LA	SA 6
Brian Dow	DMH	QA
Jennifer Mize	DMH	SA 1
Sandra Chang	DMH	CCU
Alicia Gonzalez	Foothill Family	SA 3
Helena Ditko	DMH	Compliance
Anshu Agarwal	DMH	Outcomes
Nicole Gutman	DMH	SA 4
Linda Nakamura	Masada Homes	SA 8
Carmen Solis	Alma Family Services	SA 7
Nikki Collier	DMH	Quality Assurance
Misty Aronoff	Step Up on Second	SA 5
Jennifer Hallman	DMH	Quality Assurance

Respectfully Submitted,

Dr. Kara Taguchi