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

MEETING MINUTES
January 2025

Type of meeting:	Monthly QIC Meeting	Date:	1-13-2025
Location:	Microsoft Teams	Start time:	9:00 AM
		End time:	10:00 AM
Recording:	Countywide QI Committee Meeting-20250113 - Jan 17th, 2025		
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 and shared today's meeting Agenda, Meeting Minutes from November 2024, and Who's Here/QIC Attendees. Stacey Smith welcomed Department of Public Health Substance Abuse Prevention and Control (SAPC) to the QIC.	Please email DMHQI@dmh.lacounty.gov if you need to be added to the meeting distribution list or have any edits for the November 2024 minutes.	Dr. Kara Taguchi
II. Revisiting Service Equity Data Analysis	Dr. Rosa Franco shared the work she has been doing for the new Service Equity Report which combines 2 previous sections of the Quality Assurance and Performance Improvement (QAPI), Population Needs Assessment and the Service Equity Analysis that looked at prescribing rates, hospitalization rates, and telehealth services across various demographic groups.	Dr. Kara Taguchi shared that this data is similar to what is used in the Cultural Competency report for LA County and Mental Health Services Act Needs Assessment. Dr. Franco is preparing to take the next step into a deeper analysis and talking points related to this data.	Dr. Rosa Franco

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	She reviewed several ways to analyze the data for prescription rates across race/ethnicity in our system for calendar year 2023. Dr. Rosa Franco used the Asian race throughout her presentation as an example of the methods for calculations used and what the data shows. Method #1 demonstrated that by dividing the number of Asian clients prescribed medication by the distinct number of Asian clients tells us that 74.4% of all Asian clients served are being prescribed medication. Method #2 describes how to calculate the proportion of each race and ethnicity out of the entire population of clients prescribed medication or the distribution of clients prescribed medication by race. This shows the number of Asian clients prescribed medication by the total number of clients prescribed medication and it tells us that 3% of clients prescribed medication are Asians. Method #3 shows how to calculate the proportion of each race and ethnicity that is being prescribed medication out of the entire population of clients by dividing the number of Asian clients prescribed medications to the total number of clients served and tells us that Asian clients on medications make up 2.1% of all clients served at DMH.	Dr. Kara Taguchi shared we've used the overall population numbers as our denominator in previous reports but what Dr. Franco is presenting is that it does not tell the whole story. As we look at the number of Asian clients across all the people that we serve or even all the people that are prescribed meds, there are very low percentages because Asian populations are not represented a lot in our system and underserved. When looking at the rate of Asian clients that we are serving prescribed medication, they are at one of the highest rates of any race. Dr. Socorro Gertmenian shared the idea of looking at age groups is good. She noticed that the Native American group is also high which is interesting. She shared a preference for Table #3. Dr. Kara Taguchi shared all the breakdowns are important to see. The Service Equity Analysis serves as a reference. Pieces can be taken away from the table that may be important to what

Method #4 determines the proportion of each race/ethnicity that is prescribed antidepressants out of the entire population of clients served. By taking the number of Asian clients on antidepressants and dividing it by the total number of clients served tells us that Asian clients on antidepressants make up 1% of all clients served.

Method #5 is determining the proportion of clients served for each race and ethnicity that is being prescribed antidepressants. Taking the number of Asian clients on antidepressants and dividing it by the number of Asian clients served tells us 35.9% of Asian clients served are being prescribed antidepressant medications.

Dr. Rosa Franco asked for feedback on the various methods shared and which data points the committee felt were important to look at for service equity.

Dr. Rosa Franco shared Analysis of Prescription Medication Rates by using 70.2% of clients served at DMH are prescribed medications as point of comparison. Native American clients were prescribed medication at 74.5% in comparison to 70.2% of clients served, which is 4.3% higher. Asians were at 4.2% higher, White clients at 3.4% higher, Native Hawaiian clients at 2.4% higher, African American clients at 1.5% higher, and Hispanic clients at 1.2% lower than that 70.2% rate.

people are looking for. It provides options.

Dr. Susan Wilson stated the categories are named well. She suggested to add a key at the bottom that explains it a little more or having visual representation like a pie chart. If people start to get confused, they have that available to review. She thanked Dr. Rosa Franco for doing the work and stated that trying to find useful data with complex factors about the people we serve is very useful.

Robin Ramirez inquired what is the difference between Method 2 and Method 3.

Dr. Kara Taguchi shared the difference is the denominator, Method 2 showed the percentage of Asian clients overall that are prescribed medication. Method 3 is the percentage of Asian clients over the total client population. Showing that they are represented a little bit higher in the population of people getting medications than in the population of people we serve. What is surprising is the 74.4%. If we were just looking at

		overall population rates, this important piece of data would have gotten lost.	
		Dr. Andrew Nguyen inquired for this data set how medications were categorized. Dr. Lisa Benson responded.	
		Dr. Kara Taguchi shared Dr. Andrew Nguyen and Dr. Sou are working with Clinical Informatics and can be the subject matter experts on classifications of medications and bringing it to a large audience this way no one is looking at data in isolation.	
		Dr. Andrew Nguyen asked how current the data is.	
		Dr. Lisa Benson shared that this specific project was for Calendar Year 2023. It is a mixture of prescribed and/or filled meds depending on the source, the data is a combination from the Plan Data Feed and Order Connect.	
		Dr. Kara Taguchi shared the 70.2% is a good comparison rate.	
Adjournment	Dr. Kara Taguchi shared a big thank you to Dr. Franco. For next month's meeting we will continue with Service Equity Data Analysis		Dr. Kara Taguchi

	presentation and discuss missing items from the Equity Report such as diagnoses. Thank you everyone for all the comments and all the feedback. This will help us move forward with the discussions that we would like to have in this meeting and items we need to take action around improving. Next North Regional QIC meeting will be held Wednesday 1-29-2025 at 10am, and South Regional QIC meeting will be held Thursday 1-30-2025 at 10am.	

Next Meeting: February 10, 2025, from 9:00 AM to 10:00 AM

NAME	AGENCY	DMH PROGRAM
Kara Taguchi	DMH	Outcomes & Quality Improvement
Stacey Smith	DMH	Quality Improvement
Daiya Cunnane	DMH	Quality Improvement
Rosa Franco	DMH	Quality Improvement
Laarnih De La Cruz	DMH	Quality Improvement
Volga Hovelian	DMH	Outcomes & Quality Improvement
Maria Moreno (CLESGV)	DMH	SA 3
Linda Nakamura	Masada Homes	SA 8
Sandra Chang	DMH	Cultural Competency Unit
Michelle Rittel	DMH	SA 2
Helena Ditko	DMH	Clinical Policy
Rosalba Trias-Ruiz	DMH	SA 3
Socorro Gertmenian	Wellnest LA	SA 6
Greg Tchakmakjian	DMH	SA 7
Ly Ngo	DMH	Clinical Risk Management
Kimber Salvaggio	DMH	SA 2

Toni Robinson	DMH	Peer Services
Wanta Yu	DMH	Quality Assurance
Lauren Nakano	DMH	Health Access and Integration
Engelbert Salinas	DMH	Outcomes & Quality Improvement
Robin Ramirez	DMH	MHSA Administration
Rachel Santellan	DPH	SAPC
Tiana Mondaca	DMH	Forensics
Lisa Benson	DMH	Clinical Informatics
Stephanie Johnson	Wraparound	SA 1-5
Renee Lee	DMH	QA
Keisha White	DMH	SA 5
Elisabeth Gildemontes	DMH	Patients' Rights
Chandler D. Norton	Specialized Foster Care	SA 6
Colleen Blodgett	Specialized Foster Care	SA 2
Ignacia Salas	DMH	SA 1
Suzanne Lopez Wilson	DMH	Juvenile Justice Mental Health Program - Forensic Psychiatry Division
Su Kim	DMH	MHSA
Linda Nakamura	Masada Home	SA 1, 6, 7, 8
Lisa Leon	Specialized Foster Care	SA 6, 7
Carrie Helgeson	DMH	Qualified Individual
Jeremy Winn	DMH	Child Welfare
Karen Berstein	DMH	Housing and Job Development
Haydouk Zakarian	DMH	SA 4, 5
Berteil Eishoei	DMH	QA
Brian Hurley	DPH	SAPC
Andrew Nguyen	DMH	Pharmacy

Respectfully Submitted,
Dr. Kara Taguchi