

REGIONAL QUALITY IMPROVEMENT COMMITTEE (QIC)- NORTH

MEETING MINUTES

January 2025

Type of meeting:	Regional QIC	Date:	1-29-2025
Location:	Microsoft Teams	Start time:	10:00AM
		End time:	11:30AM
Members Present:	See Table Below		
Agenda Item	Presentation and Findings	Discussion, Recommendations, and/or Needed Actions	Person(s) Responsible
Welcome and Introductions	Dr. Daiya Cunnane and Kimber Salvaggio welcomed everyone and briefly went over review of Meeting Minutes and attendance.		Dr. Daiya Cunnane Kimber Salvaggio
Lunar New Year & Labor Acknowledgement	Stacey Smith shared today is Lunar New Year, as any New Year is a chance for new beginnings. Hoping this New Year brings many positive things and healing. Happy Lunar New Year everyone. Stacey Smith shared Labor Acknowledgement.		Stacey Smith
Consumer Perception Survey (CPS) Update	Dr. Daiya Cunnane shared the Consumer Perception Survey (CPS) is a nationwide survey that happens once a year in the month of May. There are four different versions of the survey that clients and their caregivers can complete, based on the client's age. It is important that we get surveys out to as many people as possible so that we can hear back about the good things that we are doing and hear about the ways that we can improve services and make changes. It	Question was posed in the chat if we already have access to the CPS portal, do we need to apply again. Dr. Daiya Cunnane answered yes, for Contracted providers you should have access and there should be a little icon available. It may not be active at the moment as we wait for our application team	Dr. Daiya Cunnane

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	<p>is State and Federally mandated and through our participation we receive millions of dollars.</p> <p>Dr. Daiya Cunnane shared we will not find out the exact date of the survey until around March 2025, but we advise that you send reminders and mark your calendars since the month of May is a busy month as it is also May is Mental Health month. We have a CPS distribution list that piloted last year. It is how we will be communicating information and materials to everyone. Please make sure you get on the distribution list. There will be a general overview recording that reviews each of the types of surveys and some small details about how to utilize them so that you can start thinking about which type of survey you prefer to use. You can choose multiple formats of the surveys, electronic versions or paper.</p> <p>Legal Entity providers must have C numbers ready and active to participate in the CPS survey. The C number is the number you use to access the system for example, if you're going into SRTS or any DMH systems, you need a C number. You will also need C numbers to use electronic versions of the survey.</p>	<p>to make updates and as we make adjustments to the application. For DOs, you should still have access to it.</p> <p>Alexis Pascarella wanted clarification if the intake window is the window when clients are with the intake therapist before they are handed off to their primary provider.</p> <p>Dr. Daiya Cunnane shared yes, complete the assessment or the intake period and then once that's complete and client starts another service such as case management, medication, or therapy, is when to present survey.</p> <p>Kim Salvaggio shared I love the idea of being able to get an intake done in the first seven days. She asked if the QA Team can discuss further details regarding the intake period.</p> <p>Nicole Gutman shared you don't always need an assessment to start giving services now.</p>	
2023 CPS Open Ended Comments	<p>Dr. Daiya Cunnane shared the 2023 open-ended comments analysis is complete. Although it is outdated, we see trends in some of the remarks that our clients and caregivers</p>		Dr. Daiya Cunnane

	<p>have. It allows clients and caregivers to get to say in their own words concerns or experiences they have had. There were 9,500 completed surveys and 120 providers reported comments. Approximately 1,700 comments were received.</p> <ul style="list-style-type: none">• Positive feedback is very important and there is so much gratitude and acknowledgement of the impact of our services, and comments such as we saved their lives which was mentioned multiple times, how impactful our services are, and providing useful quality services that they feel are really impacting their lives. Great remarks about Cultural Competency and Cultural appropriateness. There was a lot of gratitude for having therapists that speak the same language. These are things that you want to share with your staff, it helps them keep doing good work. There are specific staff names mentioned which is great to acknowledge who is doing positive/ wonderful things.• We do of course get negative comments and some of the important ones were feeling that the communication was poor, processes were inefficient, feeling like they were being judged and not helped, difficulty contacting staff, poor customer service across the board for staff, calling out a client's weight in public, saying		
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	<p>negative and derogatory things to clients, concern about appointment times were interfering with school and school activities, a need for both telehealth and in person services, and mostly impact of turnover and losing their therapist.</p> <p>Some comments include suggestions such as need for new programming, different kind of groups and educational opportunities, having nutritionists available, and having a chaplain available. We also received recommendations on how to improve access and options for snacks like having vending machines available.</p> <p>We need to emphasize the need for Customer Service training and that includes all staff, front office, security, even cleaning staff, and therapists, nurses and psychiatrists.</p>		
2024 CPS Open Ended Comments	<p>Dr. Rosa Franco shared 168 providers reported that they received open-ended comments from their clients. The total number of comments that we reviewed for 2024 was a little over 2,600. We used Rapid Qualitative Analysis and took a little bit of what we learned from reviewing the 2023 comments to broaden the number of thematic categories to 14. We ended up having a pretty good level of agreement across all the comments it was 80% amongst all the reviewers. Most of the comments that we received were positive.</p> <ul style="list-style-type: none"> Positive comments included impact of treatment, staff related experience, 	<p>Kimber Salvaggio shared some of the recommendations are outside of our control such as adding hours and staff turnover. We want our front desk to have good customer service skills. We had a security guard in one of our child clinics who we trained in customer service as he had worked at other clinics but never around children. As a child, seeing a guy in a uniform can be a scary especially at the doctor's office. What the security guard started doing is</p>	Dr. Rosa Franco

	<p>comments about specific staff (therapist, case manager, psychiatrist, etc.). Some of the things that were mentioned were skills that they learned in their treatment, the positive changes they saw in their life because of treatment, decrease in symptoms, and improved relationships. The comment that really came up a lot is just having someone to talk to and this helps so many who are alone. This shows you have great staff working at your sites and it's reflected in the comments that we received.</p> <ul style="list-style-type: none">• The recommended improvements are similar to what Dr. Cunnane mentioned a moment ago. Comments include a lot of staff turnover, need for more groups, more flexibility with the scheduling, more availability on the evenings and weekends, more frequent sessions, family sessions, reduce wait times for services, better communication, phone calls not being returned, and customer service. Front desk staff being rude, insensitive, or unsupported comments by their practitioners were some negative comments. Also, having to wait in the clinic past their appointment time for their therapist to come out or their session was cut short. Other comments included their therapist missed or canceled a session short of notice and weren't given sooner appointment when rescheduling.	<p>bringing crayons and he would leave them on his desk and that became a piece of what we did to train our security guards.</p>	
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	<p>There were comments about wanting to go back to in person sessions.</p> <p>To summarize, most of the comments received were positive. We made recommendations based on improvement/suggestions for new programming, and negative comments on impact of services and staff. Issues to address include staff retention and decreasing staff turnover.</p>		
QA Update- Access to Care	<p>Jennifer Hallman shared presentation on Access to Care data. DMH is currently on a corrective action plan related to our Child Access to Care and Psychiatry Access to Care. New requests for services are between 14,000 and 18,000 new requests per month. We are currently working on getting November and December data. In September there are over 18,000 requests and about 55% of those requests result in an appointment. Good news is timeliness has been on an upward trend, but we are under a Corrective Action Plan. We are expected to be over 80%. It is good to see that over the years we are at 86% for our entire system. We want to try to find pockets where we are struggling. Data compares 0-20 years old and 21 years and over. Our access to care for kids tend to be lower. For adults we're hitting upwards of over 90% timely access. Overall adults are impressive. Great job to our adult providers at SA 1 as they are at 90%. SA 6 is the lowest at 82% but, they are still above 80% which is great. For kids we are struggling to get</p>	<p>Patricia Robles-Vilchez wanted to clarify in the chat if the first offered psychiatry appointment should be upon intake assessment or anytime in treatment the client requests a Med support appointment.</p> <p>Jennifer Hallman shared yes, you would be reporting to us at any point in treatment, from initial request for Med Eval or when it's determined that a Med Eval is needed. It would be from that point to the date of appointment that we are tracking as it is critical to have Psychiatry data. You will have to set up processes of when you would start collecting that information, who would be entering it, etc.</p> <p>Kimber Salvaggio wondered with CalAIM, a question came up</p>	Jennifer Hallman

	<p>to the 80% benchmark. We are receiving data slower from our contracted providers and as that data comes in, it drops down the percentage, so we need to do some improvements there. The service areas for kids that we want to target to improve access are SA 6 who was at 71% in October, SA 8 at 73%, and SA 2 at 77%. We do understand that there can be impacts on the different Service Areas such as number of providers, the number of FTEs, maybe providers are not accepting clients at this time, and of course more staff needed. We are open to any thoughts that anybody might have and feel free to put it in the chat or reach out to me directly.</p> <p>We started looking at some of our FSP data around timeliness. We were looking at the days from request to appointment and you will see longer times to appointment for FSP because you have that outreach and engagement phase that is included. The average time from request to appointment is 19 business days, 41% were given an appointment within 10 business days of the request and almost 70% were given an appointment within 30 business days of their request which is impressive.</p> <p>Some of the things that we are working on in Access to Care key initiatives are:</p> <ul style="list-style-type: none">➤ Universal Entry which is single access point for online referrals to	<p>earlier in the meeting, what is the intake period.</p> <p>Jennifer Hallman shared that there is none.</p> <p>Kimber Salvaggio wondered under the CalAIM, when do providers give the clients surveys for CPS.</p> <p>Jennifer Hallman shared in her opinion it would be anybody who's gotten a service of any sort. It is more important now to do that. We do not want the intake process or the assessment to be a barrier to getting needed services. I think if the client has received any type of service, let's see how we did.</p>	
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	<p>determine the most appropriate program for the referral</p> <ul style="list-style-type: none"> ➤ Centralized Scheduling is the ability to centrally schedule appointments at any directly operated or contracted clinics. We are currently doing this in Service Area 3 and thank you to providers who have been participating. We found this has been working well for our clients. We are hoping to expand this to all Service Areas and the rest of the County. ➤ Monitoring where we can step in and identify gaps. We recently updated our service request log in our CSI web service so that you can send us data. It is important to make sure you are working with your vendors and staff to capture and send to us the data. This is our tracking for Psychiatry timeliness over the next year. We were unable to report this to the state for our entire system. 		
Next Meeting: April 30, 2025, at 10:00am-11:30am			
Attendance			

NAME	AGENCY
Kara Taguchi	DMH-QI/Outcomes

Stacey Smith	DMH- Quality Improvement
Daiya Cunnane	DMH- Quality Improvement
Rosa Franco	DMH- Quality Improvement
Laarnih De La Cruz	DMH- Quality Improvement
Alben Zatarain	Enki Health Services, Inc
Alejandra Lopez Mercado	D'Veal Family and Youth Services
Alexandria Johnston	Child & Family Center
Alexis Pascarella	Bourne Family Services Inc.
Alfred Sun	Spiritt Family Services
Allison Foster	VIP CMHC
Allison Hardey	Hillsides
Amber Anderson	Antelope Valley MHC
Ana Vicuna	Phoenix House
Ania Ahmadi	DMH - Compliance
Armen Yekyazarian	DMH QA
Ashlei Sullivan	The People Concern
Belinda Williams	Tessie Cleveland Community Services
Beth Foster	Hillsides
Brenda Moreno	Dignity Health - California Behavioral Health Clinic
Brittany White	Personal Involvement Center
Brooke Love, Ph.D.	D'Veal Family and Youth Services
Camille Larkins	Optimist Youth Homes & Family Services
Candice Clayton	Bourne, Inc.
Carmen Solis	Alma Family Services
Carrie Valentine	Tarzana Treatment Centers
Charlotte Bautista	Gateways Hospital & Mental Health Centers, Child & Adolescent Outpatient Program
Cheri Noone	Five Acres
Chrysten Piert	SBHG Star View
Cindy Ferguson	SA 1 Palmdale Admin
Cindy Luna	Bridges Inc. Trustart
Claire Lee	Children's Hospital Los Angeles

Claudia Martinez	Wellnest
Claudia Morales	Pacific Asian Counseling Services
Cristal Mejia	Stars View
Cristina Magarin	DMH- CMMD
Cristina Sandoval	CHLA-QueensCare
Daisy Rosales	El Centro de Amistad
Darlene Olmedo	Child and Family Guidance Center
David Palmer	Boys Republic
Deborah Hansen	LACDMH - High Desert Medical Hub
Diana	Dawson
Dora Escalante	Jewish Family Service
Douglas Corrigan	Children's Center of the Antelope Valley
Dr. Fulviu Mihai Fodoreanu	Center for Integrated Family and Health Services
Eilene Moronez	Enki Health Services, Inc.
Emma Hernandez	Heritage Clinic
Faith Oluwadare	Optimist Youth Homes and Family Services
Gassia Ekizian	Foothill Family
Grace Florentin	Pacifica Hospital of the Valley Behavioral Health Urgent Care Center
Gwendolyn A. Thomas	Rancho San Antonio
Heather Bowen	Children's Hospital Los Angeles
Heather Hays	Bright Horizon STRTP
Holly Meza	San Fernando Child Family Center
Hyun Kyung Lee	DMH CMMD
Iling Wang	DMH Certification Unit
Isis Ruiz	Outpatient Pomona- Ettie Lee
Jairo Peralta	The Children's Center of the Antelope Valley
James McEwen	SFC DMH
Janelle Dent	Children's Institute, Inc.
Janet Lester	Institute for the Redesign of Learning/Almansor
Jasmin Velasco	Tarzana Treatment Centers - Mental Health
Jasminder Chahal	TAY Navigation Team/ 7623c

Jeanine Caro-Delvaille	Child & Family Center
Jennifer Mitzner	Olive Crest
Jennifer Mize	SA 1
Jenny Rodriguez	Tessie Cleveland Community Services Corp
Jenny Sanchez	Phoenix House
Jessica Orellana	All For Kids/Children's Bureau
Judy Morales	Rancho San Antonio
Julie Jones	Hillview Mental Health Center, Inc.
Julie Jones	Hillview Mental Health Center, Inc.
Karina Krynsky	SFC-SC
Karla Cano	ST JOSEPH CENTER
Kathryn Aguenza Louie	Pacific Asian Counseling Services
Kayla McCondichie	All For Kids
Keisha Blackshear	The Institute for the Redesign of Learning formerly Almansor Clinical Services
Keisha C. White	DMH Service Area 5 QA/QI Lead
Kimber Salvaggio	DMH SA 2
Laura Aquino	Amanecer CCS
Laura Padrino	CA Mentor
Leah Gutierrez	The Guidance Center
Linda Nakamura	Masada Community Mental Health Services and SA8 QA/QI Co-Chair
Linda Santiman	Los Angeles LGBT Center
Lisa Dang	Tri City MH
Lisa Harvey	Para Los Ninos
Lorena Pardo Perez	The Teen Project Freehab CRTP
Maria Moreno	SA 3 Admin
Maria Vazquez	St Anne's Family Services
Marisol Guzman	Hillview Mental Health Center
Mark Rodriguez	Bridges Inc
Marta Colocho	SFC Lancaster/SFC DMH
Mary Camacho Fuentes	Palmdale Mental Health Clinic
Megan McDonald	Topanga West Guest Home/ACT Health and Wellness

Melanie Murad	Trinity Youth Services Yucaipa
Melissa Rodriguez	Boys Republic
Michele Burton	The Help Group
Michelle Rittel	SA2 Administration
Misty Aronoff	Step Up on Second
Myra Smith	Eggleston Youth Centers, Inc.
Nadia Ziglari	HealthRight 360 / Prototypes
Nancy Flores	DMH/ Olive View Medical Hub
Nancy Trinh	7619 - SSG Alliance 19JD - SSG Alliance CRTP Florence House
Nassim Harrison	The Village Family Services
Nicole Gutman	DMH/SA4/Hollywood MHC
Nikki Collier	DMH-QA Unit
Patricia Robles-Vilchez	Star View Community Service
Quenia Gonzalez	Star View
Rachel Villa	Haynes Family of Programs
Rebecca Schaal	Haynes Family of Programs
Rejeana Jones	McKinley Services
Renee Yu	SSG Alliance 7619, Florence House CRTP 19JD
Roberta Del Angel	Star View Community Service
Robyn Gomez, LCSW	United American Indian Involvement, Inc. (UAI)- Behavioral Health
Roxana Bermudez	All For Kids/QA dept.
Rozell Montgomery	Children's Bureau/All for kids.
Sandi Long	Gateways Homeless Services and Wellness Center
Sarah Sullivan	East San Gabriel Valley FSP
Sarah Won	KYCC (Koreatown Youth Community Center)
Sauntrie Abellera	LACDMH Compliance
Shaun Allen	Kedren Health
Silvia Padilla	Personal Involvement Center SPA 6
Silvia Sanchez	San Gabriel Children's Center

Silvia Yan	SSG-Asian Pacific Counseling & Treatment Centers
Socorro Gertmenian	Wellnest
Sonia Zubiarte	DMH QA
Stephanie Cho	LAGMC Psychiatry
Susana Gomez	Pacific Clinics
Suzy Donabedian	Pacific clinics
Sybil Chacko	Maryvale
Tatevik Abaryan	CalWORKs Programs Administration
Therese Stephano	Star View Community Services
Tiffani Tran	Five Acres
Tiffany Harvey, PsyD	Alafia Mental Health Institute
Vicky Rivera Vasquez	Starview-community service
Victoria Shabanzadeh	Stirling Academy, Inc. (Stirling Behavioral Health Institute)
Virginia Casimiro-Pedersen	Victor Treatment Centers, Pomona
Windy Luna-Perez	Outpatient Pomona - Ettie Lee
Xiomara N. Leal-Reyes	Hillview Mental Health Center
Xochitl Corona	Olive View CRT - Stars Behavioral Health Group
Zeena Burse	Rancho San Antonio
Zhena McCullom	DMH QA/QI

Respectfully,

Quality Improvement