Avatar Process Improvement Meeting Minutes

2/10/2022 9:00 AM - 10:00 AM

Meeting Identity and Mission: Inclusive, collaborative, agenda driven Continued Process Improvement meeting focused on new state and

federal requirements, as well as improving client care and staff experience.

Opportunity to: Share both our voice and needs to impact processes & procedures, create and modify forms and

workflows, develop reports and widgets

Commitment to: Bring information back to the groups we represent, gather input and test current projects to ensure they

meet our needs

Meeting Website: Click here for meeting agendas and minutes. Avatar Resources / Meetings

Get Involved! •To add agenda items, complete the <u>AVATAR request form</u>; contact is

David.chicoine@santacruzcounty.us

• Housekeeping items - Please use the raise hand function or the chat box if you have

questions, comments, concerns.

AGENDA ITEMS>>>

Introductions TIME: 5 minutes STAFF: Dave

1. Next meeting - February 24, 2022

2. Introductions: name, program

Announcements

1. Agendas and meeting minutes are posted on the Avatar Webpage, Meetings Subpage.

2. MH User Compliance Report is now in LIVE. We will probably continue to add minor refinements to the report, but it is ready to be used.

Project Status and Updates

 New Telehealth and Phone Text Templates for progress notes (due to changes in telehealth regulations) are in UAT for review.
 STAFF: Dave TIME ALLOTTED: 15 mins



a. New standards for documenting telehealth/phone consent:

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- For Telehealth, only obtain verbal consent, at the first visit. No one has to get consent every time anymore.
- ii. For phone
 - 1. MH (Short-Doyle, etc...) does not have to get consent at all.
 - 2. FQ therapy and psychiatry still must get consent at every visit.
- b. No objections from committee re this change.
- c. Info Notice Coming Soon and Items will be added to LIVE. (Nancy)

2. MEDICAL INFORMATION section on Psychosocial Assessment

STAFF: Dave TIME ALLOTTED: 15 mins

BACKGROUND: Changes were made to several questions in the Medical Information section of the Psychosocial Assessment SC form to comply with state audit findings.

- a. Changes: All questions in the section now be enabled, most red/required. Labeling and lightbulbs were edited on some questions to help guide staff.
- □ Legal History
 □ Medical Information

 MEDICAL INFORMATION

 Medical History
 Medications
 □ Developmental History
 □ Substance List

 Psychosocial Assessment SC

 MEDICAL INFORMATION
 Relevant physical health conditions
 Client reports .
 Per hospitali from
 Per Progress note
- b. No objections from committee re these changes.
- c. Committee to examine defaulting on questions on this page.

3. Client Alerts Cleanup STAFF: Flor Perez/Erica Ortiz TIME ALLOTTED: 10 mins

Workgroup Update - Erica Ortiz

- a. Met with public guardian and clarified workflows for conservatorship status. The system is working well.
- b. Flor Perez working with fee clerks on getting alerts cleaned up. There are a lot and reception/clerical is short-staffed right now. Currently we have about 500 alerts, down from 900.
- c. Many of the remaining alerts are more clinically oriented and cannot be removed by clerical staff. These need to be looked at by clinicians or their supervisors.

4. Children's Intensive Support Services (ISS) assessment and tracking

STAFF: Stan Einhorn TIME ALLOTTED: 10 mins

- a. BACKGROUND: All CMH clients must be assessed at admission and every six months to see if they qualify for enhanced, intensive services, per new state regulations.
- b. Current procedure involves paper forms and a spreadsheet. There are two paper forms, an assessment form, and a referral form. The referral form is filled out depending on the outcome of the Assessment. Assessment is done at intake and every six months thereafter.
- c. Stan Einhorn reached out to contractors. All have different procedures and workflows.
 - i. There had been discussion about rolling this assessment into the psychosocial but since it has to be done more often than the psychosocial it should be a separate form.
 - ii. Stan to organize subcommittee.

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5. DMC-ODS Pre-Admit Workgroup Report Out STAFF: Sarah Tisdale

Has not met recently due to scheduling issues.

6. Request to update the SC MH Short Treatment plan to have the headings in both English and Spanish like the other treatment plans. STAFF: Sarah Tisdale

- a. Committee approves update.
- b. Nancy to work on this.

7. CANS/ANSA Spanish question labels in Spanish (like on MH Episodic Tx Plan)

- To make the form more culturally available and to facilitate reading the form to the parent in Spanish.
- b. Lauren Fein (not present) is the manager of CANS/ANSA implementation.
- c. Discussion about current practice staff going over form with parents/children vs. filling out the assessment after meeting with client/family.
- d. Possibly we are waiting for the Praed Foundation to give us a Spanish version of the most recent version of the CANS/ANSA. Stan will investigate.

8. DMC RTAR Form (Residential Pre-Authorization Form) – Conversion from Paper Form to Avatar Form

STAFF: Amanda Crowder

- a. This paper form is used for authorizing residential substance use treatment placements. There is a tight legal timeframe on these placements and having this info in Avatar would be helpful for tracking.
- b. Discussion of potentially adding questions to provide more clinical information to the form.
- c. We may need to hold off on this as this procedure may change with Cal-AIM.

Action Items TIME: minutes

- 1. SC MH Short Treatment plan to have the headings in both English and Spanish (Nancy Mast)
- 2. Children's Intensive Support Services (ISS) assessment and tracking to be organized. (Stan Einhorn)

Parking Lot

- 1. California Advancing and Innovating Medi-Cal (CalAIM) discussion.
- 2. Project list review and update for new year.
- 3. Possible updates to Evidence Based Practices (EBPs) question in progress notes. Keep in parking lot for now since CalAIM will change this most likely. Topic: Use of evidence-based practices in the General Purpose Progress note to meet the state requirement of Documenting Coordination of Care –DHCS for MH requires demonstration of coordination of physical and mental health care.

Next Meeting

February 24, 2022 Time: 9 AM - 10 AM

Attendees

Briana Kahoano (County SUD), Dagny Blaskovich (Volunteer Center), Dave Chicoine (County QI), Erica Ortiz (County Accounting), Gian Wong (County IT), Jorge Fernandez (County IT), Kayla Gray (Psychiatry), Maya Jarrow (Janus), Nancy Mast (County QI), Robert Annon (AMH), Stan Einhorn (CMH), Stephanie Macwhorter (Janus)