



## QA MINUTES December 18, 2007

### Committee Members In Attendance:

Chris Johnson	Rick Gehlbach
Adrienne Felts	Kimberly Blair
Jennifer Schwind	Shawna Watts
Mike Selegue	Caleb Tipple - Intern
Brad Hedges	

### Meeting Discussion

1. Shawna gave a status report on the written QA reports and monthly chart reviews.
2. The committee provided some feedback regarding the changes to the QA reports.
3. The next QA committee meeting will be held on January 22, 2008.

### I: MAJOR UNUSUAL INCIDENTS

The committee reviewed the MUI's that were verbally presented for November. One incident was reviewed, which occurred when the parent of a client fell in an upstairs hallway and had to be transported by paramedics due to being unable to walk. This incident was reviewed due to the potential liability the agency could incur as a result of the incident. The agency's insurance company is aware of the issue.

### II: ABUSE AND NEGLECT AND DUTY TO WARN

Abuse and neglect report statistics were presented to the committee. A brief description was included of each report as suggested by the committee during the previous meeting.

### III: TRANSFERS FROM STATE HOSPITALS

There was one discharge from a state hospital and one discharge from community hospitalization. Both clients were seen within seven days.

### IV: PLANT/PHYSICAL HEALTH AND SAFETY

There were no plant/physical health and safety items to report to the committee for the month of November. Members were asked to look around the building for suggested improvements and areas of concern as preparations continue for CARF.



**V: RECORDS COMPLETENESS REVIEW AND VI: PEER REVIEW**

Record and Peer reviews were presented for the month of March to the committee. Discussion was had regarding finishing up reviews for April and May, so that the next reports could be completed. A June list is also available, however reviewers were cautioned to be aware of transcription delays that may affect the completeness of notes in the chart.

**VII: UTILIZATION REVIEW**

Utilization tables were presented. It was reported that the no show/cancellation rate continues to be down 3% compared to recent agency history. The scheduling proficiency has increased by 3% over the past couple of months. Dr. Hedges explained that this is an important measure in determining how well the agency is doing at filling white spaces and lost time.

**VIII: INVOLUNTARY TERMINATIONS**

No involuntary terminations were conducted during the month of November 2007.

**IX: PROFESSIONAL STAFF ORGANIZATION**

No clinical staff reported attending training during the month of November.

Chris Johnson has passed his Professional Counselor exam.

Karis Mason received her Professional Clinical Counselor license.

**X: REVIEW OF WAITING LIST**

An increase in the number of new clients being seen has been noted over the past couple of months. Reasons for this were discussed with the committee, one of the reasons is that we are getting clients in a timelier fashion, we have cut almost a week off of the time it takes to get a new client into see a counselor. This trend coupled with client retention are the key to returning the agency to a better financial picture.

**XI: REVIEW OF SERVICES UNDER CONTRACT**

The contract services being provided by Daniel DiSalvo, CNP in Columbus continue to be going well. At this time, we are providing only 8 hours of psychiatric service a month in Columbus.

## **XII: FOCUSED REVIEW AREA**

Multiple focused review areas were discussed by the committee. The oldest project, the CSP services review was reported to have chart reviews completed and an attempt to start the write up of the material.

The focused review area of the Survivor's program is underway. All forms and general information have been completed. There are approximately 30 charts to be reviewed and these are underway. This project should be completed by mid-January.

The focused review area of consumer needs will be completed during December. A waiting room survey has been designed and will be used in the waiting rooms of the agency. This project should be completed by mid-January.

## **XIII: RESPONSE TO LAST MONTHS FOCUS REVIEW**

There was no response from committee members regarding last months focus review.

## **XIV: CLIENT RIGHTS AND GRIEVANCES**

There were no client grievances that were discussed with the committee from November. The committee discussed the issue of psychiatric services in the Lancaster office since Dr. Snyder has left. Staff continues to assist clients in seeking medication from their PCPs; some physicians have been willing to do this, others have not. There is a shortage of psychiatric services across Ohio at this point, so the agency is looking into the possibility of telemedicine, although this process will require a substantial investment, it is being explored with the ADAMH Board.

## **XV: TREATMENT OUTCOMES REPORTING**

Discussion was had by the committee regarding some of the challenges that have been discovered in using the data available in the ODMH Data Mart. Rick Gehlbach has been attempting to contact someone at the state level to discuss the issues we are encountering. At this point it has been reported to the committee by Rick that the only useful information seems to be at a 30 day mark and most of the response information is from FY2006. A resolution to these issues will continue to be sought.

cc: Fairfield County Mental Health and Recovery Services Board  
MOPS Board of Directors

MOPS Staff  
QA Minutes Log Book