



QA MINUTES October 9, 2007

Committee Members In Attendance:

Chris Johnson	Rick Gehlbach
Adrienne Felts	Kimberly Blair
Jennifer Schwind	Shawna Watts
Mike Selegue	

Committee members unable to attend Brad Hedges and Jessica Mitchell.

Meeting Discussion

1. Shawna gave a status report on the written QA reports and monthly chart reviews.
2. The committee discussed changing the format of the monthly QA report to reflect the activities that occur during the QA meetings, the formatting changes are still in progress, the new format should be presented to the committee at the next meeting.
3. The next QA committee meeting will be held on November 13, 2007 at 10:00am.

I: MAJOR UNUSUAL INCIDENTS

The committee reviewed the MUI's that were verbally presented for September. The committee members did not identify any issues that needed to be follow-up on.

II: ABUSE AND NEGLECT AND DUTY TO WARN

Abuse and neglect report statistics were presented to the committee. No questions regarding the method of reporting or the five reports were given.

III: TRANSFERS FROM STATE HOSPITALS

Transfers from state and community hospitals were reviewed with the committee. No issues of care were raised by the committee, clinical staff are complying with the requirement that clients be seen within fourteen days of requesting services.



IV: PLANT/PHYSICAL HEALTH AND SAFETY

There were no plant/physical health and safety items to report to the committee for August. The agency continues improve the agency's appearance, health, and safety as opportunities are presented.

V: RECORDS COMPLETENESS REVIEW AND VI: PEER REVIEW

No records or peer review information was presented to the committee. Information will be presented to the committee as when the next month is available to be reviewed.

VII: UTILIZATION REVIEW

Utilization charts were not ready to be presented at this meeting, they will be presented along with October reports at the November meeting.

VIII: INVOLUNTARY TERMINATIONS

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

IX: PROFESSIONAL STAFF ORGANIZATION

The committee was presented the information regarding the agency sponsored trainings activities during the month of September. The committee had no concerns regarding the information presented.

Follow-up from last months meeting included, the presentation of ideas for training topics for next year, these included, Ethics, Supervision, Objective Testing, and Projective Testing.

General information was also shared regarding the ADAMH Board's subscription to an on-line training program called NetSmart. Training has already begun on the program; it has a projected start date of November 1st.

X: REVIEW OF WAITING LIST

New client graphs were not ready to be presented at this meeting, they will be presented along with October reports at the November meeting.

XI: REVIEW OF SERVICES UNDER CONTRACT

Follow-up from last months meeting included an update on the medication services being provided in the Columbus office by Daniel DiSalvo, CNP. All feedback has been positive regarding the addition of these services. The agency received Board approval for these services September 13, 2007.

XII: FOCUSED REVIEW AREA

The focused area of review for September is to review clinical pertinence and appropriateness of services rendered (Utilization Review)

A review of the agency's high utilization clients was conducted for this focused review. Clinical staff were notified individually of issues related to their charts and what action needed to be taken. Follow-up was made to verify corrections had been completed.

The committee had no feedback regarding improvements in this review.

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 September.

XV: TREATMENT OUTCOMES REPORTING

The method from which treatment outcomes reporting is derived was discussed. The area has not been as useful as it could be due to the QA Coordinators lack of understanding of the dynamics and reasoning behind the data and reports. Discussion regarding clinical committee members need to be involved in this area of reporting was discussed. Currently, Dr. Hedges will attempt to present useful information for inclusion in the QA reports due to the reports needing to be caught up. In the future, further discussion will be had with committee members regarding topics, data collection, and reporting for this area.

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

MOPS Staff
QA Minutes Log Book