



QA MINUTES February 24, 2009

Committee Members In Attendance:

Miranda Zircher	Brad Hedges
Shawna Watts	Mike Selegue
Kimberly Blair	Heather Stevens
Jennifer Schwind	

I: MAJOR UNUSUAL INCIDENTS

The committee discussed fourteen MUI's from November through January; most were related to the hospitalization and evaluation of clients. Two notable occurrences were the report of an employee fall on agency property and the report of cleaning agency person making harassing calls from the Columbus office. All reports were sent to the appropriate boards within 48 hours of the occurrence.

II: ABUSE AND NEGLECT AND DUTY TO WARN

There were 12 reports made to Child Protective Services from November through January. The reports that were made were made in a timely fashion to the appropriate county's CPS office. Most of the reports filed were filed with CPS in Fairfield and Franklin counties.

There were two "duty to warn" reports filed during this same time period. There were no further incidents related to these reports after contact was made with the involved parties and local law enforcement.

III: TRANSFERS FROM STATE HOSPITALS

There were three hospitalizations to be reviewed by the committee for the months of November through January. All were community hospitalizations, and two of the clients were seen within 14 days of their release. The third client relocated out of county after discharge and has been unable to attend any sessions. The client's therapist contacted the client to attempt to facilitate follow-up care.

IV: PLANT/PHYSICAL HEALTH AND SAFETY

There were no physical plant/ health and safety items to report during the months of November through January.



It was discussed with the committee that the agency did pass the annual fire inspection in all agency locations during this time period.

V: RECORDS COMPLETENESS REVIEW AND VI: PEER REVIEW

The committee discussed the fact that we are significantly behind on chart reviews. We discussed the need to train additional staff to do chart reviews. The list for July 2008 is currently available.

VII: UTILIZATION REVIEW

Dr. Hedges discussed the increased utilization of services in relation to staff production and the agency financial recovery plan. The committee discussed the demand for services in Licking County increasing at a faster pace than we can accommodate within 30 days of initial telephone contact.

VIII: INVOLUNTARY TERMINATIONS

No involuntary terminations were conducted during the months of November through January.

IX: PROFESSIONAL STAFF ORGANIZATION

The committee discussed the agency's ongoing efforts to comply with CARF training requirements. Three more trainings were assigned to staff in January through Netsmart. They are *Violence in the Workplace v.2* for all staff, *Behavioral Assessment: An Overview and Ethics IV Part A Boundaries* for clinical staff, and finally *Promoting Customer Service for Internal and External Customers* for support staff.

Dr. Hedges discussed with the committee a training he is in the process of developing on Client Rights. He has worked to incorporate the history of mental health treatment in Ohio as a way to explain why the current client's rights system has been developed.

X: REVIEW OF WAITING LIST

No clients are on a waiting list. The number of new clients has increased slightly over the past few months with the addition of Licking County. The clients in Licking County are waiting longer than 30 days to be seen for the first time due to significant demand for services.

The portion of the information that is normally reported on the QA reports regarding the number of days it takes to get a client scheduled for their first appointment and then seen for their first appointment will not be reported until modifications can be made by the agency programmer. This report was broken when the agency updated its Xakt software in November.

XI: REVIEW OF SERVICES UNDER CONTRACT

Daniel DiSalvo, CNP continues to provide services in the Columbus office. Agency staff is currently working with him for a standard medication services note to improve consistency of documentation between offices and meet accreditation requirements. In addition, he will be doing peer reviews of Dr. Smith charts.

XII: FOCUSED REVIEW AREA

The committee discussed the need to conduct a referral source survey and reviewed a draft of the survey. It was noted that we are currently working to change survey software that we use because the software we were using is no longer available due to a change in ownership of the company. Strategies for getting the survey out to the most people and returned were discussed. Our intentions at this point are to provide both a hard copy and web version of the survey, to target specific referral sources (ie. courts, cps, etc.) and have any referral source that comes to the agency for a two week period of time complete one.

The committee discussed the January requirements. A fire drill was completed. The annual safety review will be presented to the Board of Directors at the March meeting. The committee discussed the need to review trends and patterns in service highlighting gaps of service. After discussion of whether we should review services by location, it was decided that we should review services by units over the whole agency.

The committee discussed the February requirements. A review of accessibility, availability, and appropriateness of services for persons who speak a language other than English or have a handicapping condition was discussed. A language line service that offers 170 languages and offers pay as needed billing was discussed with the committee. This interpretation service can be utilized using speaker phone within a scheduled session. Heather Stevens discussed concern that speaker phone is not available in Columbus; this matter will be addressed with the MIS Coordinator and telephone service person.

Two accessibility issues regarding clients with wide wheelchairs were discussed with the committee. These clients will be provided accommodations in the middle building utilizing an external door due to being unable to fit through internal doors. The clients were also offered the opportunity to be seen offsite.

A survey will be conducted of all staff regarding accessibility, availability, and appropriateness when we can implement the new survey software previously mentioned.

XIII: RESPONSE TO LAST MONTHS FOCUS REVIEW

The committee discussed the September focused area of reviewing the agency's Anger Management Program. The chart reviews have been completed. A draft of the program

evaluation was presented to the committee for feedback. Dr. Hedges is working on some additional data analysis before the program evaluation is complete.

XIV: CLIENT RIGHTS AND GRIEVANCES

There were no formal client grievances during the months of November through December. Two informal client issues were discussed with the committee from this month.

Dr. Hedges also clarified that in instances where personnel action is appropriate, the agency will address issues raised informally by clients as personnel issues and staff members may be disciplined.

XV: TREATMENT OUTCOMES REPORTING

Dr. Hedges discussed with the committee some of the reports he has been working on with the agency's programmers. He also discussed a project that compares state and agency data that we will be working on reporting over the next few months.

XVII: GENERAL DISCUSSION

Brief updates were given regarding the Care Management Scales; a data analysis is needed.

The standards of care website continues to be developed, posting of trainings and updated information is running behind.

The agency's required annual CARF Quality Improvement Plan was filed and accepted by CARF.

Next meeting is scheduled for March 24, 2009.