



## QA MINUTES April 27, 2010

### **Committee Members In Attendance:**

Heather Stevens	Shawna Watts
Mike Selegue	Jennifer Schwind
Brad Hedges	Beth Sleeper
Misty Coleman	

### **I: MAJOR UNUSUAL INCIDENTS**

The committee discussed three MUI's from March. One MUI was reported only at an agency level, and the other two were reported to the Fairfield County ADAMH Board. There was a delay in sending one of the reports to the ADAMH Board.

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

There were ten reports made to Child Protective Services during March. The reports that were made were made in a timely fashion to the appropriate county's CPS office. The increase in the number of reports during March can be attributed to an increase in the number of new clients and the total number of client's seen by staff.

There was one "duty to warn" report filed during March. A group home was called after a client made threats against caregivers. This situation was deemed to have been handled appropriately.

### **III: TRANSFERS FROM STATE HOSPITALS**

There were no community hospitalizations to be reviewed. There were two releases from a State hospital noted this month. Both clients were seen on the day they were released from the hospital.

### **IV: PLANT/PHYSICAL HEALTH AND SAFETY**

The committee discussed the fire inspection issues related to the agency's expansion into a new office space in Newark. The committee also discussed the upcoming inspection in the new office that is being established in Delaware.

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

The committee is currently reviewing charts from September through December. More staff is completing reviews. We hope to have the span of charts being reviewed moved into 2010 by May.



There will be increased effort to bring QA reports up to date in the next month or so. The Administrative Coordinator will be working with a summer intern to accomplish this task.

The committee discussed the importance of new staff being reviewed within the first couple of months after they begin with the agency. The feedback provided by the review is a valuable tool in making sure the new clinicians develop proper practices in their job habits.

The committee also discussed the need to restart the peer reviews of the psychiatrist and nurse practitioner for the agency. Maintaining this process has been a significant issue due to the limited number of hours the staff spends at the agency.

#### **VII: UTILIZATION REVIEW**

Utilization of all service types has been increasing, the intakes for new clients has remained strong. No significant concerns were identified.

#### **VIII: INVOLUNTARY TERMINATIONS**

No involuntary terminations were conducted during March.

#### **IX: PROFESSIONAL STAFF ORGANIZATION**

We are still conducting weekly trainings within the agency. Committee members are to continue to explore further training needs.

Dr. Hedges discussed the plans to offer the JSO Symposium series again in the coming months in order to train new staff and comply with the training requirements of the agency's JSO certification. Each staff member involved in the agency's program must obtain a minimum of 6 hours of the 12 hours of training that will be offered.

#### **X: REVIEW OF WAITING LIST**

No clients are on a waiting list. The number of new clients has remained strong--there were 137 new intakes during the month of March.

#### **XI: REVIEW OF SERVICES UNDER CONTRACT**

Daniel DiSalvo, CNP continues to provide services in the Columbus office.

#### **XII: FOCUSED REVIEW AREA**

The focused review area for April is to review referrals to other agencies. This review is conducted for the prior year using the monthly summary forms that are completed by staff each month.

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

The AOD program review is completed; the information will be posted to the web soon.

The committee discussed accessibility, availability, and appropriateness of services for persons who speak a language other than English, or have a handicapping condition. A survey of staff regarding this issue has been completed. The narrative will be posted soon.

Dr. Hedges has completed a survey to be taken by all staff regarding clinical practices. This project will, among other things, be used to make updates to treatment protocols and the SOC website. The narrative will be posted soon.

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

There were no informal client grievances during March.

### **XV: TREATMENT OUTCOMES REPORTING**

Outcomes were discussed by the committee. The agency has developed and implemented our own tool for measuring outcomes. The agency will use both the State forms and new forms for the next 180 days.

### **XVII: GENERAL DISCUSSION**

Standards of Care were discussed briefly. The committee discussed the need for clients to have standards of care for the programs they are enrolled in at the agency, not just a general standard of care.

The committee discussed the upcoming CARF accreditation. The Administrative Coordinator will be attending training on the standard changes in early May.

Next meeting is scheduled for May 25, 2010.

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

MOPS Staff  
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