

QA MINUTES

August 30, 2011

Committee Members In Attendance:

Heather Stevens
Mike Selegue
Shawna Watts

Brad Hedges
Shauna Ridenour
Zachary Schellhause

Major Unusual Incidents

The committee reviewed MUI's from July. There were two incidents reviewed. They were reported to the ADAMH Board in a timely manner.

Abuse and Neglect and Duty to Warn

The committee reviewed reports from July. There were a total of thirteen reports. Many of the reports were made during client intake sessions.

Transfers from State and Community Hospitalization

The committee reviewed releases July. There was one client released from state hospitalization and two released from community hospitalization. All clients were seen within the fourteen day requirement.

The client who was released from state hospitalization had an extended hospital stay, the committee discussed reasons that someone would be hospitalized for extended periods of time, they normally include cases of NGRI and medication stabilization needs.

Plant/Physical Health and Safety

Each site is conducting the monthly reviews. At this time there are no major issues being addressed.

The Lancaster office had a fire inspection conducted. There were a few issues that needed to be addressed and a re-inspection was conducted.

Records and Peer Review

Committee members reviewed the records review form for needed changes. All chart review personnel were emailed and made suggestions for updates. The committee members made further suggestions.

The chart reviews are getting slightly better. All clinicians have been emailed that they are required to review one chart per month.

Utilization Review

The number of services being provided continues to increase as agency sites grow. The agency has increase the total number of clients seen from 2,000 to 3,000 in the last couple of years.

Involuntary Terminations

There were no involuntary terminations.

Professional Staff Organization

The committee reviewed the results of the training survey. Dr. Hedges discussed the upcoming training scheduled of 48 in-house trainings this year.

The QA Coordinator also discussed the CARF required trainings that were rolled out to all staff.

Review of Wait List

The new clients for each location were reviewed. The site continues to see clients within thirty days from intake.

Services Under Contract

There have been no changes to the services provided by Daniel Disalvo. His contract has been renewed.

Focused Area of Review

The review for July was to review client rights, complaints, complaints and grievances. The annual report was reviewed by the committee.

Review of Previous Months Focused Area of Review

The utilization review is underway. Renee White has started reviewing charts.

Client Rights and Grievances

There were no current grievances were reviewed. The annual report was reviewed.

Treatment Outcomes Reporting

Plans to build Outcomes into CIS are underway. All staff should be using Outcomes as a data source when developing ISP's. Outcomes should be used in objectives and comments.

Risk Management

The risk management section has been added to the areas that the committee monitors due to CARF requirements. The QA Coordinator outlined the current issues that the agency is monitoring from a risk prospective. These include a BWC claim, a Medicaid payback issue, and how our agency is required comply with an annual audit.

Dr. Hedges discussed day-to-day issues that pose risks to the agency.

Standards of Care

Clinical staff continue to develop the website. A support staff section is also being developed.

General Discussion

The committee members discussed the goals and objectives that need be added to agency ISP's to comply with CARF standards. They are:

- Expressed in the words of the person served.
- Appropriate to the age of the person served.
- Reflective of the persons age.
- Responsive to disabilities.
- Understandable to the person served.
- Measurable.
- Reflective of the person's development.