



NORTH SOUND REGIONAL SUPPORT NETWORK

QUALITY MANAGEMENT OVERSIGHT COMMITTEE

COMMITTEE MEETING PACKET

NOVEMBER 9, 2000

**North Sound Regional Support Network
Quality Management Oversight Committee
NSRSN Conference Room
November 9, 2000
12:30 – 3:00**

AGENDA

			Time	Page #
1.	Open the meeting & comments from the Chair		5 minutes	
2.	Approval of October Minutes	Chair Byrne	5 minutes	3
3.	Reports			
	Action Items:			
A.	CHAP Update	Ms. Benoit	10 minutes	5
	Informational Items:			
A.	Ombuds Report	Ms. DeCino	20 minutes	6
	▪ Quarterly Report			
	▪ Ombuds, RSN, Provider Responsibilities			
B.	SeaMar Quality Assurance Plan	Ms. D'Allegri	30 minutes	9
C.	Tribal Liaison	Ms. Dempsey	20 minutes	10
D.	Local Crisis Oversight Committee (LCOC)	Mr. Williams	10 minutes	11
E.	Coordinated Quality Improvement Program (CQIP)	Mr. Williams	10 minutes	12
F.	Inpatient Review	Mr. Williams	10 minutes	13
G.	SeaMar Concurrent Review Results	Mr. McDonough	15 minutes	14
4.	Other Business			
A.	Quarterly Meeting Evaluation	Chair Byrne	5 minutes	
5.	Adjourn			

**North Sound Regional Support Network
Quality Management Oversight Committee
NSRSN Conference Room
October 12, 2000**

Members Present:

Chuck Benjamin, Chair	Dave Gossett
Chuck Albertson	Marcia Gunning
JoAnn Angevine	Dolores Holtcamp
Tori Benz-Hillstrom	Joan Lubbe
Dan Bilson	Terry McDonough
Lorelei Coy	Francene Thompson
Melissa DeCino	Linda Vaughan

Staff:

Sharon Lucas
Beckie Bacon
Linda Benoit
Annette Calder
Betsy Niemann
Mike Page
Diana Striplin

Guests:

Jill Dace
Marie Jubie

1. Open the Meeting & Comments from the Chair

Chair Benjamin called the meeting to order at 12:30 p.m. and introductions were made. He shared some of his thoughts on becoming the new Executive Director of the NSRSN in November as well as comments he has received from staff and the public.

2. Approval of September Minutes

The minutes were reviewed and approved as written.

3. Reports

Action Items

A. Critical Incidents Policy

Mike Page addressed the group regarding the status of the critical incident policy and procedures with Sea Mar and VOA. See attachment A for more information. A brief discussion followed.

B. Meeting Schedule

Francene Thompson related the difficulty some members are encountering regarding the meeting schedule of this committee. Discussion regarding the schedule followed. Chair Benjamin stated he would request that the Board of Directors appoint a new Chair of QMOC prior to our November meeting and allow the new Chair to address this issue.

Chair Benjamin informed those present that the December meeting of the Board of Directors has been rescheduled to take place on December 7th, discussion followed. It was decided by the group to wait until the November meeting to determine if there will be a meeting in December.

Informational Items

A. QRT Tool

Dolores Holtcamp and Beckie Bacon presented the QRT consumer satisfaction survey results for the first two quarters of 2000 and reviewed the information with the committee, discussion followed. Reports indicated a high level of consumer satisfaction. However, consumer concerns remain regarding case management.

B. Grievance, Complaints and Fair Hearing Process

Diana Striplin addressed the group regarding the grievances, complaints and fair hearing process. She reported on the period of October 1, 1999 to March 31, 2000, discussion took place. It was stated that anyone interested may join the subcommittee formed at the September QMOC meeting to review this process.

C. Crisis Review Report

Diana Striplin and Linda Benoit made a presentation to the committee regarding the Crisis Review Report and thanked all of the provider agency staff that were involved in gathering the data. Committee members had many questions and comments. See attachment B for further information.

D. Information System / Information Technology

Francene Thompson made a presentation to the group regarding data gathered, the quality of that data, how it is used and tracked as well as what is being done to improve data quality. A brief discussion followed.

E. NSRSN Audit Process

Marcia Gunning addressed the committee regarding the MHD audit that will begin October 23, 2000. She discussed the purpose and distributed a tentative schedule. See attachment C for additional information.

F. Quality Management Plan 2000

Francene Thompson provided the committee with a brief overview of the status of the Quality Management Plan as of the end of the second quarter of 2000. It was stated that the 2001 plan is being formulated and those people/departments that are asked to be accountable in reporting are included in the development of the 2001 plan. Some discussion took place. See Attachment D for more information.

4. Other Business

There was none.

5. Adjourn

Chair Benjamin stated the next meeting will be November 9, 2000 at 12:30. The meeting was adjourned at 3:10 p.m.

NSRSN COMMITTEE DISCUSSION FORM

AGENDA ITEM: CHAP PROGRAMS - UPDATE

PRESENTER: LINDA BENOIT

COMMITTEE ACTION: Action Item (x) FYI & Discussion (x) FYI only ()

SIGNIFICANT POINTS OR EXECUTIVE SUMMARY:

- Overall, there has been significant progress toward the goal of a Regional CHAP (or CHAP-like) services that meet the needs of children in all five counties. See attachments. Counties are at various stages of development in terms of CHAP program efficiency and effectiveness.
- DCFS 4-E waiver will change nature of our partnership with DCFS – will begin with Island/San Juan demonstration project
- Current NSRSN/APN CHAP contract will expire 12/31/00

CONCLUSIONS/RECOMMENDATIONS:

- Negotiate one-year contract with APN for continued CHAP Services (1/1/01 – 12/31/01)
- Continue carve-out funding and close monitoring of CHAP programs
- Continue planning with DCFS for 4-E waiver options post 12/31/01

TIMELINES:

QMOC approval of CHAP recommendations is anticipated at the November 9 meeting. Timelines for review with DCFS, presentation to APN and contract re-negotiation has not yet been determined.

HANDOUTS:

Compass CHAP Monitoring Update, 10/16/00 will be available at the meeting. Compilation of APN Monthly Program Reports will be available at the meeting.

NSRSN COMMITTEE DISCUSSION FORM

AGENDA ITEM: Quarterly Report & Ombuds/RSN Responsibilities

PRESENTER: Melissa, Nancy & Betsy

COMMITTEE ACTION: Action Item () FYI & Discussion (x) FYI only ()

SIGNIFICANT POINTS OR EXECUTIVE SUMMARY:

Quarterly Report for 7/1/00 – 9/30/00

WAC, Waiver & Statement of Work overview

CONCLUSIONS/RECOMMENDATIONS:

None

TIMELINES:

None

HANDOUTS:

WAC, Waiver, & Statement of Work will be available at the meeting.

**NORTH SOUND REGIONAL SUPPORT NETWORK
QUARTERLY OMBUDS SERVICE REPORT**

July 1, 2000—September 30, 2000

Number of New Cases: 21

Number of Cases Carried Over from the Prior Period: 37

30 days: **8**
60 days: **9**
90 days: **4**
Prior: **16**

Source of New Cases:

Consumer for self: **35**
Relative: **8**
Other: **10**

Demographic Information: *(Identify number in each category if client provides information)*

Male: 18	Adults: 49
Female: 31	Children: (0-20) 5
Elderly: (55+) 1	

Cultural/Ethnic:

African American: 0	Asian/Pacific Is: 0	Caucasian: 47
Hispanic: 4	American Indian/Alaskan Native: 0	

Cases by County:

Island: 7	San Juan: 0	Skagit: 7
Snohomish: 27	Whatcom: 15	

Total Contacts: 1037

Total Unduplicated Contacts: 118

Information Request: **0**

Referral Request: **4**

Complaint Data:

Denied or Reduced Access to Services: 11	Physicians & Medications: 1
Dignity and Respect: 8	Financial Administration Services: 3
Quality/Appropriateness: 11	Residential: 9
Phone Calls not returned:	Transportation:
Service/Client not Involved in Treatment Planning: 3	Emergency Services:
Violation of Client Rights: 8	Other: support system (Legal): 8

Type of Resolution:

Telephone Information/Referral Provided: **7**
Referral to Quality Review Team:
Resolved through Conciliation/Mediation: **31**
Arbitration:
Fair Hearing: **2**
Other:
Not pursued: **6**

CC: Executive Director, NSRSN
NSRSN Board of Directors
Office of Consumer Affairs Manager
Quality Management Oversight Committee
NSRSN Advisory Board

Mental Health Division
P.O. Box 45320
Olympia, WA 98504

NSRSN COMMITTEE DISCUSSION FORM

AGENDA ITEM: SeaMar Quality Improvement Plan

PRESENTER: Claudia D'Allegrì

COMMITTEE ACTION: Action Item () FYI & Discussion (x) FYI only ()

SIGNIFICANT POINTS OR EXECUTIVE SUMMARY:

- To assure clients receive appropriate services when needed.
- Maintain accessibility to services and continuity of care.
- To measure the performance of the organization and initiate improvements and/or changes where needed.
- Minimization of risk to patient.
- Medical records contain accurate information.
- Provide QMOC membership with a yearly update of the SeaMar Quality Improvement Plan.

CONCLUSIONS/RECOMMENDATIONS:

- Provided at QMOC meeting.

TIMELINES:

- Review on an annual basis.

HANDOUTS:

- Documentation to be provided upon request.

NSRSN COMMITTEE DISCUSSION FORM

AGENDA ITEM: Tribal Report – Post Traumatic Stress Disorder

PRESENTER: Sharri Dempsey

COMMITTEE ACTION: Action Item () FYI & Discussion (x) FYI only ()

SIGNIFICANT POINTS OR EXECUTIVE SUMMARY:

Overview of Attendees and Agency Representation:

- 7 Tribes present
- 17 Agencies

CONCLUSIONS/RECOMMENDATIONS:

- 76 attended workshop
- Participants asked for more information and further training opportunities
- Many questions regarding treatment milieu
- Many questions regarding diagnostic crosswalks to other DSM diagnosis

TIMELINES:

Training was held on October 16, 2000 from 9:00 am to 12:00 noon

HANDOUTS:

- PTSD evaluation will be distributed at the meeting.

NSRSN COMMITTEE DISCUSSION FORM

AGENDA ITEM: Local Crisis Oversight Committee/Regional Meeting

PRESENTER: Gary Williams

COMMITTEE ACTION: Action Item () FYI & Discussion (x) FYI only ()

SIGNIFICANT POINTS OR EXECUTIVE SUMMARY:

This committee represents the 5 crisis oversight committees that meet locally.

- Regional meeting consists of County Coordinators and or designees from each county in the North Sound region.
- Although local committees meet with varying frequencies and participation, the Regional Committee will convene quarterly.
- Committee will review documentation of outcomes of local crisis interventions
- Areas of mutual concern will be identified
- Policies and procedures for each committee will be reviewed
- Recommendations for crisis program enhancements and/or changes may be brought forward by the group.

CONCLUSIONS/RECOMMENDATIONS:

This committee will be evolving as it meets and more clearly defining its roles and responsibilities.

TIMELINES:

Next meeting is scheduled for January, 2001.

HANDOUTS:

None

NSRSN COMMITTEE DISCUSSION FORM

AGENDA ITEM: NSRSN Application to the Department of Health for approval as a Coordinated Quality Improvement Program

PRESENTER: Gary A. Williams

COMMITTEE ACTION: Action Item () FYI & Discussion (x) FYI only ()

SIGNIFICANT POINTS OR EXECUTIVE SUMMARY:

What it means if the NSRSN receives approval as a CQIP program (RCW 43.70/510)

- All individuals who in good faith provide information to further the purposes of quality improvement and malpractice prevention, or who participates on a quality improvement committee shall not be subject to an action for civil damages or relief as a result of such activity.
- Quality Assurance and Quality Improvement documents specifically created and maintained for Quality Improvement are not subject to discovery or introduction into evidence in any civil action.
- No person who was in attendance at designated QI committee established for Quality Improvement shall be permitted, or required to testify in a civil action as to the content of such proceedings.

Status of Application:

- The NSRSN application was submitted to the Department of Health on October 16th 2000
- The Department of Health has forty-five working days to review and either approve or deny our application. This means we should know the status of our application on or around the first January 2001.
- If the application for CQIP status is declined by the Department of Health, there is a process which allows for an opportunity for a brief adjudicative proceeding (RCW 34.05.482)

CONCLUSIONS/RECOMMENDATIONS:

Awaiting review by the Department of Health

TIMELINES:

January 2001

HANDOUTS:

Copy of CQIP Application is in the NSRSN Library

NSRSN COMMITTEE DISCUSSION FORM

AGENDA ITEM: NSRSN Inpatient Episode of Care Review

PRESENTER: Gary A. Williams

COMMITTEE ACTION: Action Item () FYI & Discussion (x) FYI only ()

SIGNIFICANT POINTS OR EXECUTIVE SUMMARY:

Status of Quality Management Team review of Inpatient Episodes:

- Initial review completed on one type of Inpatient episode.
 - What array of services was provided to the (enrolled) consumer both 30 days prior to the hospital episode of care, as well as 30 days following discharge from the hospital?
 - Was the appropriate and necessary documentation evident in the consumer's outpatient chart, which describes events leading up to, including and after the hospitalization? (Evident of coordinated discharge process including availability of hospital records in the outpatient record.)
 - Was the appropriate and necessary documentation evident in the consumer's chart, which describes the plan for assisting the consumer after their discharge from the hospital?
 - Was clinically appropriate continuity of care maintained throughout this episode of care by the primary care providers?

CONCLUSIONS/RECOMMENDATIONS:

- Review established an inpatient database for future inpatient reviews.
- Inpatient review assisted RSN staff in identifying methodological issues, which lead to improved future review processes.
- Review process has resulted in a collaboration with APN and the State Mental Health Division towards identifying the most meaningful performance indicators and outcomes.
- The NSRSN Quality Management staff will be meeting with APN staff to further analyze the results of the initial inpatient review.
- The NSRSN Quality Management staff will conduct further reviews during calendar 2001 to assess performance against the established benchmarks.
- The NSRSN Quality Management staff have scheduled further inpatient reviews which will occur in the third quarter of 2001 and be reported to QMOC in the fourth quarter of 2001.
- The Review of Inpatient Care is a priority for focused QA/QI reviews during calendar 2001.

TIMELINES:

Ongoing and as needed on a Urgent Basis.

HANDOUTS:

- Inpatient Episode of Care Review Tool will be distributed at the meeting.
- Narrative of review Results will be distributed at the meeting.

NSRSN COMMITTEE DISCUSSION FORM

AGENDA ITEM: SeaMar Community Health Outpatient Concurrent Review
2000

PRESENTER: Terry McDonough

COMMITTEE ACTION: Action Item () FYI & Discussion (x) FYI only ()

SIGNIFICANT POINTS OR EXECUTIVE SUMMARY:

- Annual review of SeaMar clinical records done in August 2000
- NSRSN QM/RM staff visited Everett and Bellingham clinics
- SeaMar records met, nearly met or exceeded standards on 23 of 44 criteria.
- SeaMar clinical staff and RSN staff met to discuss Draft report on October 11, 2000

CONCLUSIONS/RECOMMENDATIONS:

- SeaMar staff will prepare an Action Plan, in response to the Concurrent Review
- NSRSN QM/RM staff will review SeaMar's Action Plan and recommend acceptance or revision to QMOC
- NSRSN QM/RM staff will monitor the implementation of SeaMar's Action Plan through future concurrent reviews.

TIMELINES:

None

HANDOUTS:

SeaMar Review Results available at the meeting.