



NORTH SOUND REGIONAL SUPPORT NETWORK

QUALITY MANAGEMENT OVERSIGHT COMMITTEE

COMMITTEE MEETING PACKET

SEPTEMBER 19, 2001

QMOC GUIDING PRINCIPLES

The QMOC charge is to guide the quality assurance and quality improvement activities of mental health services within the NSRSN region. In assessing the necessary data and making appropriate recommendations, the QMOC members agree to the following:

- ◆ Help create an atmosphere that is SAFE.
- ◆ Maintain an atmosphere that is OPEN.
- ◆ Demonstrate RESPECT and speak with RESPECT toward each other at all times.
- ◆ Practice CANDOR and PATIENCE.
- ◆ Accept a minimum level of TRUST so we can build on that as we progress.
- ◆ Be SENSITIVE to each other's role and perspectives.
- ◆ Promote the TEAM approach toward quality assurance.
- ◆ Maintain an OPEN DECISION-MAKING PROCESS.
- ◆ Actively PARTICIPATE at meetings.
- ◆ Be ACCOUNTABLE for your words and actions.
- ◆ Keep all stakeholders INFORMED.

Adopted: 10-27-99
Revised: 01-17-01

**North Sound Regional Support Network
Quality Management Oversight Committee
NSRSN Conference Room
September 19, 2001
12:30 – 2:30**

AGENDA

			Time	Page #
1.	Open the meeting & comments from the Chair		5 minutes	
2.	Approval of August 2001 Minutes <small>Action Item</small>	Chair Byrne	5 minutes	4
3.	Reports			
A.	NSRSN Quality Management Plan 2001, 2nd Quarter Report <small>Action Item</small>	Ms. Thompson	30 minutes	7
B.	Sea Mar Quality Management Plan <small>Informational Item</small>	Ms. D'Allegri	30 minutes	8
C.	APN Workload Quarterly Report <small>Informational Item</small>	Ms. Murray	30 minutes	9
D.	Hospital Utilization Report <small>Informational Item</small>	Mr. Williams	15 minutes	10
4.	Other Business			
	Meeting Evaluation	Chair Byrne	5 minutes	11
5.	Adjourn			

**North Sound Regional Support Network
Quality Management Oversight Committee
NSRSN Conference Room
August 15, 2001
12:30 – 2:30**

MINUTES

Members Present:

Substitute Chair Chuck Benjamin
Charles Albertson
Pamala Benjamin
Dan Bilson
Melissa DeCino
Sharri Dempsey

Dolores Holtcamp
Karen Kipling
Rosemary Lea
Joan Lubbe
Francene Thompson
Michael White

Members Not Present:

JoAnn Angevine
Andy Byrne
Lorelei Coy
Claudia D'Allegri
Dave Gossett
Marcia Gunning
Terry McDonough
Linda Vaughan

Staff Present:

Greg Long
Mike Page
Annette Calder

Guests:

Marie Jubie

1. Open the meeting & comments from the Chair

Substitute Chair Benjamin opened the meeting at 12:30 and welcomed everyone informing them that he was filling in for Chair Byrne who is on vacation.

2. Approval of July 2001 Minutes

It was moved and seconded to approve the minutes as written.

3. Reports

A. QRT Quarterly Report

Ms. Holtcamp provided the group with handouts of the 2nd Quarter QRT Report (Attachment A). A question and answer period followed. The committee thanked Dolores for the report.

B. Critical Incidents Review Committee

Mr. Page distributed handouts (Attachment B) to the committee. His report covered an 18-month period and discussed the revision of the Critical Incident Policy & Procedure. Mike stated that the revised policy and procedure has resulted in an increase in reporting but may not mean there are more Critical

Incidents occurring. He also discussed the charge of the Critical Incident Review Committee. Discussion followed regarding adding the county populations to the report. Mike presented three options to the committee, A motion was made to combining option 1 and 3, and remove "CIRC member" in #3, motion seconded, discussion followed. The options presented are as follows:

OPTION 1

Request the Regional Crisis Management Team meet and define "Critical Incident" from an emergency services perspective. Mission: to design policy, procedures and reporting format that respect Emergency Services special role.

OPTION 2

Recommend VOA / ES critical incident reporting as it now occurs, whereby an emergency services incident report is determined by the potential for media coverage.

OPTION 3

Recommend VOA / ES reporting of media provoking events, and direct a CIRC member to sit at the table while the RSN Information System is developed (Information System Outcome Management Workgroup).

Substitute Chair Benjamin called for the vote, all in favor, **motion carried**. The committee thanked Mike for his report.

C. Level of Care Manual Revision

Mr. Long provided the committee with handouts (Attachment C) along with an overview of the Level of Care Manual revision process and purpose. The manual has been renamed Eligibility and Care Standards. Greg asked that the committee review the changes made and noted that some of the changes are due to WAC or MHD requirements. A motion was made and seconded to recommend that the Revision Committee continue to meet with providers to work on clarification, definition and agreement before QMOC recommends acceptance of the revised manual. Substitute Chair Benjamin called for the vote, 2 yes, 9 no, **motion failed**.

A motion was made to recommend acceptance of the document as is, motion seconded, discussion followed. A friendly amendment was made to delete the "Perceived Provider Agreement" column in the summary. Both parties accepted the amendment. Substitute Chair Benjamin called for the vote, all in favor, **motion carried**. Substitute Chair Benjamin thanked Linda Vaughan, the Resource Managers and the committee working on these revisions for their hard work.

D. VOA Quality Management Plan

Ms. Kipling provided the committee with handouts (Attachment D) and made a power point presentation on the updated Volunteers of America Quality Management Plan. Karen presented a very comprehensive report and discussion followed. The committee thanked her for the presentation.

4. Other Business

The Ombuds 2nd Quarter Report was distributed to the committee (Attachment E).

Sharri Dempsey distributed a list of Advisory Board site visits and invited anyone interested to attend (Attachment F).

5. Meeting Evaluation Results

Substitute Chair Benjamin reviewed the results of the July 18, 2001, committee evaluation (Attachment G).

6. Adjourn

Adjourned at 2:43 p.m. The next meeting will be at 12:30 on Wednesday, September 19, 2001, in the NSRSN Conference Room.

Respectfully submitted,

Annette Calder

Please note: The attachments referenced herein were distributed at the meeting and are attached to the file copy and are part of the official record. Please contact the NSRSN at (800) 684-3555 extension 230 if you have any questions, concerns or requests.

NSRSN COMMITTEE DISCUSSION FORM

AGENDA ITEM: NSRSN Quality Management Plan 2001, 2nd Quarter Report

PRESENTER: Francene Thompson

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

SIGNIFICANT POINTS OR EXECUTIVE SUMMARY:

This is the first NSRSN integrated quarterly report, citing achievement and strengths as well as areas of concern. The report was compiled using information from all NSRSN departments, analyzing trends, and presenting recommendations designed to address issues of concerns.

Areas of Strength:

- CHAP Improvements
- Caseload/Workload Management Tools Developed by APN
- DMIO Cross System Collaboration
- Developmental Disabilities/Mental Health Cross System Collaboration
- Inpatient Services Cost Study

Areas of Concern:

- Consumer perception of the speed/ease of accessing services
- Quality and Appropriateness of Services
- Dignity and Respect
- Continuity of Care

CONCLUSIONS/RECOMMENDATIONS:

Recommendations addressing areas of concern will be presented for QMOC's review and recommendations.

TIMELINES:

As determined by action plan selected to respond to concerns.

ATTACHMENTS:

Handouts provided at meeting.

NSRSN COMMITTEE DISCUSSION FORM

AGENDA ITEM: Sea Mar Quality Improvement Plan

PRESENTER: Claudia D'Allegri

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 Sea Mar Quality Improvement Plan.

CONCLUSIONS/RECOMMENDATIONS:

- Provided at the QMOC meeting.

TIMELINES:

- Review on an annual basis.

ATTACHMENTS:

- Documentation to be provided at meeting and/or upon request.

NSRSN COMMITTEE DISCUSSION FORM

AGENDA ITEM: Clinician Workload (Caseload)

PRESENTER: Paul Vanderveen, Rosemary Lea

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

SIGNIFICANT POINTS OR EXECUTIVE SUMMARY:

Clinician Workload is a complicated measure and includes consideration of the following points:

- Total clients, both RSN and non-RSN
- Clinician Full Time Equivalent (FTE's)
- Clients per clinician (Caseload)
- Caseload by service level
- Productivity (% of time spent in client activities)
- Documentation of compliance
- Client outcomes
- Client satisfaction

Paul will provide a 6-month update on the data elements that he presented to QMOC in March 2001.

Rosemary will touch on some the broader issues that provide context for this valuable information.

CONCLUSIONS/RECOMMENDATIONS:

This report is submitted for information only.

TIMELINES:

N/A

ATTACHMENTS:

N/A

NSRSN COMMITTEE DISCUSSION FORM

AGENDA ITEM: NSRSN Inpatient Data Collection

PRESENTER: Gary A. Williams, Quality Manager Whatcom

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

SIGNIFICANT POINTS OR EXECUTIVE SUMMARY:

The handout that will be provided at the September QMOC meeting illustrates an overview of the number of inpatient hospitalizations certified by the NSRSN during the period from January 1999 to June 2001. The data reflects two basic data elements, number of admissions and lengths of stay. Additional subsets include voluntary and involuntary admissions, location of admission and by age grouping at admission.

CONCLUSIONS/RECOMMENDATIONS:

This data represents the initial data set for ongoing monitoring by the NSRSN of admission and length of stay trends. It's important to note that data collected before 1999 is considered unreliable and therefore not being used.

No conclusions are being made based on this data at this time. NSRSN staff is continuing to meet with APN staff in an ongoing effort to establish agreed upon review and reporting processes.

In 2002 the NSRSN Quality/Utilization Managers will report to QMOC interpretive conclusions regarding identified trends utilizing this data.

TIMELINES:

Report to QMOC during the first Quarter of 2002

ATTACHMENTS:

None

QUALITY MANAGEMENT OVERSIGHT COMMITTEE MEETING EVALUATION FORM

Please complete this form and turn it in at the end of the meeting to the secretary.

1. Receipt of Information:

A. Was information received in a timely manner?

1 2 3 4 5
Does not meet expectation Meets expectation Exceeds expectation

B. Overall, did you receive enough information to make informed decisions?

1 2 3 4 5
Does not meet expectation Meets expectation Exceeds expectation

C. Was information sent to the appropriate place?

1 2 3 4 5
Does not meet expectation Meets expectation Exceeds expectation

D. Did we use the appropriate method? (Fax, mail, etc.)

1 2 3 4 5
Does not meet expectation Meets expectation Exceeds expectation

2. Meeting Logistics:

A. Are meeting times convenient for you? ___Yes ___No

B. In order of priority (1, 2, 3) would you rather meet
 ___morning or ___afternoon or ___evening?

C. Are meeting places convenient for you?

1 2 3 4 5
Does not meet expectation Meets expectation Exceeds expectation

3. Are meeting agendas complete and understandable?

1 2 3 4 5
Does not meet expectation Meets expectation Exceeds expectation

4. Are meetings conducted in such a way to allow you to speak and participate with a sense of safety and comfort?

1 2 3 4 5
Does not meet expectation Meets expectation Exceeds expectation

5. Are there any special accommodations you need that would be helpful to you? If so, what are they?

- Yes
- No

Please provide any additional comments you may have.

Total Score_____

Meeting Date: 9/19/01 Name(optional)_____