I.M.P.A.C.T. Quality Improvement Meeting

01/08/19 @ 1:00 p.m.

In attendance: Kris Curtis, Aaron Foote, Dr. Gamble, Dr. Pashley, Lisa Strauss, Kim Moore, Terry

MacMillan

Absent: Pam Motte

Meeting minutes – The meeting minutes from October 2018 were approved as written. FY18 Summary Report – The summary report was approved as written.

I. Report on Indicators:

1. Access to Service

Community volunteerism/community inclusion activities - (2) volunteerism activities per year and (2) community inclusion outings per quarter. Under most circumstances (unless clinically indicated), community inclusion activities are defined as outings other than trips to the party store, movies, or van ride.

*if applicable, the number of consumers participating is in ()

- a. Volunteerism Activities:
 - i. All Agency United Way Pledge Campaign (\$7,262)
 - ii. Belle River United Way pop can drive (\$67.50)
 - iii. Administration Paper Ornament sale for the Food Depot (\$120.00 and each \$1 purchases 6 meals)
 - iv. Vine, Simpson, Michigan Salvation Army Bell Ringing
- b. Community Inclusion Activities:
 - 1. Allen Various shopping and restaurant outings
 - 2. Belle River Various shopping and restaurant outings, sensory rides, movies, Santa parade in Marine City, St. Clair and Port Huron, library
 - 3. Michigan Various shopping and restaurant outings, library, mall, Pet Smart, Memphis Halloween party, Nutcracker Play at McMorran theater, sensory rides
 - 4. River Bend #1 Various shopping and restaurant outings, farm, hockey game at McMorran Arena, Christmas party at the Elk's Club
 - 5. River Bend #2 Various shopping and restaurant outings, library, St. Martin's Church, country music show at McMorran theater, Funny as a Crutch play, Marine City Merrytime days, play at East China Performing Arts Theater
 - 6. Simpson Various shopping and restaurant outings, sensory rides
 - 7. Vine Various shopping and restaurant outings, movies
 - 8. Wells Various shopping and restaurant outings, sensory rides, YMCA, Memphis Halloween Party

The annual agency Christmas Party was held on December 16, 2018, at Alexander's Banquet Center. The party was co-sponsored by Jim/Terry MacMillan and Marysville Tire and Auto. The event was well attended with much positive response from participants who enjoyed the venue, food and day/time of the party.

2. No Show Rate

a. The goal for intakes/orientations will be less than 40% and the goal for individual sessions will be less than 28%

Total No Shows (Intakes/Orientation) – 44.3% (49 attended, 39 no shows) Previous quarter - 41.3% (64 attended, 45 no shows).

Breakdown by referral source for Total No Shows (Intakes/Orientation)
Access (PIHP) – 43.6% (39.2% previous quarter)
Other (Traditional Insurance) – 35.0% (45.8% previous quarter)
Qualified Health Plans (Medicaid) – 61.5% (50% previous quarter)

Total No Show (All appointments) – 28.7% (611 attended, 246 no shows). Previous quarter - 22.8% (835 attended, 247 no shows).

Breakdown by referral source for Total No Shows (All appointments): Access (PIHP) – 28.1% (26.5% previous quarter)
Other (Traditional Insurance) – 30.1% (20.4% previous quarter)
Qualified Health Plans (Medicaid) – 43.2% (30.4% previous quarter)

Contributing factors this quarter include the following:

- i. Reduction in staff (1 staff off a considerable length of time, 1 staff on vacation
- ii. Holidays
- iii. Reduction in service hours
- iv. Counseling Business Plan developed

Therascribe/Therm data base codes/categories have changed through the years and needs to be updated. This will refine reports and make it simpler. Lisa will work on this.

3. Group Session Clients

a. Total number of clients attending group session was 181. Previous quarter = 179. Good group attendance considering reduction in staff. Groups continue to be recommended for recovery.

4. Drug and Alcohol testing

a. There were 88 appointments scheduled as drug and alcohol tests this quarter. The previous quarter there were also 88 tests completed.

5. System Accuracy

a. Medication error rate: (2) errors occurred this quarter (2) errors the previous quarter). River Bend #2 – Missed/Wrong Medication/Higher Dose. Supervisor failed to get written clarification regarding nursing home discharge instructions and accepted a verbal order from the nurse indicating no medication changes. This resulted in a 13-day medication error. Written orders were obtained with instructions to continue all medication as prescribed. Belle River - Lower dose. Neither of the medication errors resulted in an Adverse Reaction or Potential Adverse Reaction.

6. Record Compliance (Utilization Review)

- a. Clinical No records were reviewed this quarter.
- b. Residential Full reviews were completed at Belle River, River Bend 1 and River Bend 2. Overall compliance was 97.5%. Some personal profiles were not updated,

and consents not renewed. All areas have been addressed and will be corrected. Quarterly reviews were conducted at Vine and Wells. Total compliance was 100%.

c. CISD — Reviews were completed at Dorchester 1 and Dorchester 2. 82.3% compliance. Issues to be addressed include Periodic Reviews, employee personnel files. An action plan will be developed to correct these areas. recommendation was made to review the survey and update to be more specific to the HOYO program.

7. Refine communication

- a. Consumer Complaints: None reported.
- b. Corporate Compliance Complaints: None reported.
- c. Clinical Satisfaction with Initial Services On a scale of 1-5 with 5 being the most satisfied: 4.94 (17 respondents). Previous quarter: 5.0 (3 respondents).
- d. Prevention (10/01/18 thru 12/31/18) Average score 4.79. Goal is 4 or better.

Anger and Rage Management:

Increased knowledge by +6.2 points

Participants scored the class 4.54 on a scale of 1-5 with 5 being Very Helpful

Alcohol and Drug Education

Increased knowledge by +5.68 points

Participants scored the class 4.91 on a scale of 1-5 with 5 being very helpful

Alcohol Recovery Education

Increased knowledge by +6.4

Participants scored the class a 4.84 on a scale of 1-5 with 5 being very helpful

RSAT

Increased knowledge by +7.67

Participants scored the class a 4.88 on a scale of 1-5 with 5 being very helpful

Parenting

7 participants improved their scores from pre-test to post-test

2 participants remained the same from pre-test to post-test

3 participants scored from pre-test to post-test didn't improve and scored lower.

90% of parents in the class have children in foster care or living with a family member so they only have an average of 2 hours of contact per week. They have very limited time to practice the new skills they are learning in the classes.

- 8. Critical Incidents/Sentinel Events/Serious Accident or Illness There were no critical or sentinel events.
- 9. Staff Training Training for Sanilac Respite staff has been reviewed/updated. The Diabetes and Insulin Training, Introduction to Medication and Medication Administration Toolboxes have been updated. Beacon Home Care RN is providing insulin training.
- 10. CISD Authorized Unites of services 4524 Authorized 3244 Used: 72%. Goal is 90%. Will use this moving forward and make sure it is noted when individual refuses or declines

outings, staff cancels. There were also 2 holidays during this quarter. Respite - 14583 Used. The authorized units will need to be calculated based on IPOS because the current method Sanilac CMH uses to put in authorizations is 12 months based on IPOS date, not on a month to month basis.

- 11. Staff Recruitment/Retention Retention rate was 94% (staff who left the agency vs staff who remained) Staff received a \$150 Christmas gift card.
- 12. 50% of Clinical forms will be put into PDF format. This goal continues to be worked on. It is estimated that 30-35% of the intake packet has been converted in to PDF format.
- 13. New phone system IT continues to research options. Two possibilities are Verizon and Comcast Business. This is an ongoing project. Deadline is 9/30/19.

The meeting was adjourned at 1:55p.m. Next meeting will be held on April 8th @ 1:00 pm.