

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

01/20/21

In attendance: Kris Curtis, Aaron Foote, Terry McMillan, Kim Moore, Pam Motte

Meeting minutes – The meeting minutes from October 14, 2020 were approved as written. The FY20 Q.I. Summary Report was also reviewed and approved as written.

Report on Indicators:

Residential Community Housing

1. Goal: Residents will participate in community volunteer activities annually and be offered weekly community inclusion activities (*per choice and as clinically appropriate).

Objective: Increase access and participation in the residents' greater community.

Performance Target: Two community volunteer activities annually and two weekly community inclusion activities.

- a. Volunteerism activities: United Way Campaign, Belle River pop can drive for United Way, Blue Jeans for A Cause (United Way Campaign & Community Food Depot), Community Food Depot Paper Ornament Drive. The agency raised a total of \$5,745.00 for the United Way and \$260.00 for the Food Depot.
- b. Community Inclusion Activities:
 - Belle River – Various shopping and restaurant outings, sensory rides
 - Charmwood – Various shopping and restaurant outings, sensory rides, pumpkin picking
 - Michigan – Various shopping and restaurant outings, sensory rides
 - River Bend #1 – Various shopping and restaurant outings, sensory rides
 - River Bend #2 – Various shopping and restaurant outings
 - Simpson – Sensory rides, walks in the neighborhood
 - Vine – Various shopping and restaurant outings, sensory rides
 - Wells – Various shopping and restaurant outings, sensory rides

Volunteerism and community activities were reduced this quarter due to the COVID-19 restrictions, social distancing requirements and the closure of many business. Most community activities consisted of sensory rides to enjoy the fall colors or Christmas lights, visits to the park, drive-thru or take-out restaurant foods. Restrictions on outside visitors into licensed AFC group homes continues.

We continue to assist our residents to maintain communication with friends and family through teleconference or video calls. The Agency also held a Happy Holidays Decoration contest between the residential group homes. Participating homes posted a picture of their best holiday decoration creation on the I.M.P.A.C.T. Facebook page. The home with the most likes on Facebook was Vine who was able to turn in a wish list to "Santa" for their home valued at \$350.00. We will hold another contest in the Spring.

2. Goal: Minimize number of medication errors

Objective: Prevent injury to residents resulting from medication errors

Performance Target: Zero Medication Errors

One medication error (documentation) at Charmwood. Staff administered the medication but failed to document. Administration was verified by a medication count.

Previous quarter – (1) error

St. Clair County Community Integration Services

3. Goal: Weekly Activity Note Compliance

Objective: Authorized services will be accurately documented on the Weekly Activity Notes (WAN) to support individual plan of service goals and claims reimbursement. 25% of WANs will be reviewed each month.

Performance Target: 95% compliance.

100% of all WANs were reviewed October thru December. 80% of WANs were found to be completed accurately. The remaining 20% required corrections before submission to the funding source. Issues included using the wrong billing codes, not separating times for chore services, incorrect times, etc. The supervisor continues to provide education/training on the new billing method with staff. Staff are adjusting to the new method and we expect to see continued improvement.

Sanilac Respite

4. Goal: Weekly Activity Note Compliance

Objective: Authorized services will be accurately documented on the Weekly Activity Notes (WAN) to support individual plan of service goals and claims reimbursement. 25% of WANs will be reviewed each month.

Performance Target: 95%

WAN compliance score was 95% for the period of October through December. 7 out of 139 Weekly Activity Notes were found to need some sort of correction by staff prior to being submitted to the funding source. Issues were comments in the wrong area of the form, duplication of dates, spelling errors.

Prevention: Alcohol & Other Drugs/Addictions –

5. Goal: 100% of consumers will be given the opportunity to complete a Pre- and Post-test at the beginning and following completion of Alcohol & Other Drugs/Addiction classes.

Objective: Pre- and Post-tests will help the Agency improve the quality of services and increase knowledge of the participants. Results may determine the need to modify how the material is communicated to increase retained knowledge.

Performance Indicator: Pre- and Post-test results will be collected and analyzed on a quarterly basis and reported to the Quality Improvement Committee.

Performance Target: On a scale of 1-5, 4+ consumers will report that services were helpful.

All programs are being conducted via Zoom. Construction of the new conference room is underway and should be completed by the beginning of March.

ARE- Alcohol Recovery Education - This program was resumed via Zoom in December so there is no data to report (no one has completed the class).

ADE- Alcohol and Drug Education:

8 participants completed this program during the quarter. Post-test determined there was a .62% improvement in knowledge, attitude, and behavior compared to pre-tests. Participants reported the class was very helpful (4.79).

RSAT

19 participants completed this program this quarter. Post-test determined there was a .52% improvement in knowledge, attitude, and behavior compared to pretests. Participants rated the class helpful to very helpful by 4.88.

No services were provided at the Intervention Center November 30 – December 31 due to COVID-19 restrictions. Potential restart date was January 4 but this was delayed until January 19, 2021.

Record Compliance (Utilization Review)

- a. Residential – N/A due to COVID-19 visitor restrictions
- b. CISD – N/A due to COVID-19 restrictions

A subcommittee was formed to review and update the case record format for the residential group homes. IT will assist with setting up a process for completing virtual record reviews. Discussed how a virtual medication review could be conducted. The Safety Committee will be conducting external audits in the spring.

Individual Focused Services

- a. Consumer Complaints: Two substantiated Recipient Rights violations at River Bend 2. Dignity and Respect. Staff person failed to treat a resident with esteem, honor, and/or politeness. Staff involved voluntarily resigned from the Agency prior to the outcome of the investigation. Treatment Suited to Condition (staff sleeping on shift). Staff involved was counseled and received disciplinary action.

Corporate Compliance Complaints: None reported.

Critical Incidents/Sentinel Events/Serious Accident or Illness: N/A

Staff Training: Training videos were provided on face mask/surgical masks/N95 masks.

Business Goals

1. **Staff Recruitment/Retention:** The retention rates are as follows: October = 90%, November = 92%, December = 94%, January = 98%, February = 98%, March = 96%, April = 97%, May = 98%, June 98.6%, July 94.6%, August 97%, September 98%, October 98%, November 97%, December 96%. (staff who left the agency vs staff who remained). St. Clair County CMH funded staff received a \$2.00 per hour base wage increase. The \$2.00 per hour premium pay issued by the state was retained by Region 10 to offset the increase to staff's base wage. Recruitment

continues to be a challenge. We are now posting job openings through a program called OnShift. OnShift allows us to make changes to postings every 2 weeks and to also be more detailed vs Indeed. OnShift sends the job postings to multiple job recruiting sites. We also started a financial wellness program called PayActiv. PayActiv gives staff the capability of early payment of wages. The candidate pool is small. There is a lot of competition and less people who are out of work are applying due to increased unemployment benefits and stimulus payments.

2. **HCBS Medicaid Rule Transition (Residential Programs)**: Residential Programs continue to follow HCBS rules. New staff receive training regarding the HCBS rules, current staff receive updates as received. Weekly meetings are held with residents to determine their choices regarding the menu and community activities (limited due to COVID-19). Visitations are restricted. CMH has conducted virtual visits/phone calls, outside social distancing visits. No responses have been received regarding the HCBS provider surveys completed in July for residents at River Bend 1, River Bend 2, Belle River, Simpson, Wells and 4100. Full implementation of the HCBS rules is due March 17, 2022.

3. **Prevention Services (Alcohol & Drug Education)**: Continue to identify, promote, and implement evidenced-based programs addressing drug and alcohol misuse/abuse.

IC closed to classes November 30, 2020 thru December 31, 2020. Potential restart date was January 4, 2021 which was delayed until January 19, 2021. Closure was due to an increase of COVID-19 cases of inmates and jail personnel.

*Support and encourage local collaborative efforts to increase awareness

*Prevention staff participate in coalition groups

24/7 Dad Program. The Community Foundation did not approve our grant application in November 2020 but did indicate the Foundation would review the application again in February 2021. The grant is asking for assistance to offer this program at a reduced cost. The request is for \$7,857 to cover a portion of the program's first year total cost of \$9,957. Participants would pay only \$5.00 per session. The pilot did not begin in November 2020 as planned due to COVID-19 restrictions. We are beginning to promote the program for a new pilot date yet to be determined depending on COVID-19 restrictions for in person meetings. Another option is to offer the program virtually.

24/7 Dad is a voluntary, comprehensive fatherhood program designed to help men improve their parenting skills and fathering knowledge. The program focuses on building self-awareness, self-caring, and parenting, fathering, and relationship skills through 12 weekly, two-hour group or individual sessions.

SPEAK Coalition – Staff has taken on a leadership position. Participating in weekly video series “Parents Perspective with Mike and Amy” live on the St. Clair County Health Department Facebook page.

Staff are also working on short videos for Teens using the *Healthy Communication* modules.

4. **IT**: We have purchased some used computers from CMH to replace/upgrade the residential supervisor computers at Charmwood, Michigan and Simpson. A second VM host server was rebuilt. Work continues on the new IMDATA app. A list of equipment/cost has been put together for the new conference room.

5. **Capital Improvement Plan**: We will continue to evaluate needs and present recommendations for projects to the Board as needed. Construction on the new conference room began in December and is nearing completion. Lighting will be upgraded, flooring will be installed by IMPACT Operations, IT equipment needs are being determined and furniture will need to be

selected. A larger conference room will allow us to accommodate larger groups and maintain social distancing requirements. The Board will be updated on progress and costs.

Adjournment/Next Meeting: The meeting was adjourned at 3:00 pm. The next meeting will be on April 14, 2021 at 1:30 pm.