

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

05/12/21

In attendance: Kris Curtis, Aaron Foote, Terry MacMillan, Pam Motte, Denise Ellery

Meeting minutes – The meeting minutes from January 20, 2021 were 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: Blue Jeans for A Cause at Administration raised \$94.00 for the Blue Water Human Society SNAP program, Betty Kearns Little Black Dress

- b. Community Inclusion Activities:

Belle River – Various shopping and restaurant outings, sensory rides, hair salon

Charmwood – Various shopping and restaurant outings, sensory rides

Michigan – Various shopping and restaurant outings, sensory rides, parks

River Bend #1 – Various restaurant outings, rides

River Bend #2 – Various shopping and restaurant outings, bank

Simpson – Sensory rides, shopping, and restaurant outings

Vine – Various shopping and restaurant outings, sensory rides

Wells – Various shopping and restaurant outings, sensory rides, park, hair salon

Volunteerism and community activities were reduced this quarter due to the COVID-19 restrictions, social distancing requirements and winter weather. Most community activities consisted of sensory rides, visits to the park, drive-thru or take-out restaurant foods. In March, MDHHS issued guidelines and began allowing outside visitors into licensed AFC group homes.

We continue to assist our residents to maintain communication with friends and family through teleconference or video calls and support both outside/inside visitors in accordance with the MDHHS visitation guidelines.

We will evaluate whether the Agency will be able to hold its annual picnic in June. This will depend on the current COVID-19 restrictions/guidelines. Modifications would be required, i.e.: only offer the picnic to residents/staff, divide into two groups, offer curbside, or dine in/dine outside options. We will discuss with Management Team and Supervisors.

2. Goal: Minimize number of medication errors

Objective: Prevent injury to residents resulting from medication errors

Performance Target: Zero Medication Errors

Medication Errors – (2) Missed Medication, (1) Wrong Medication/Wrong time occurred during the quarter at River Bend 2.

Staff have been re-trained in medication administration and received disciplinary action in accordance with Agency guidelines.

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: 100% compliance.

100% of all WANs were reviewed January thru March. 90% of WANs were found to be completed accurately which is a 10% improvement from the previous quarter. The remaining 10% required corrections before submission to the funding source. Issues included using the wrong billing codes, not separating times for chore services, incorrect times, etc. Staff are adjusting to the new method and we expect to see continued improvement. We also plan to provide an in-service training for lead staff at each SLA location.

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 96% for the period of January through March. Only a few of the Weekly Activity Notes were found to need some sort of correction by staff prior to being submitted to the funding source.

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.

Most programs are being conducted via Zoom. Construction of the new conference room has been completed.

ARE- Alcohol Recovery Education - This program is conducted on Zoom. Participants have not filled out the pre/post-tests as required. There has only been 1 post survey completed reporting rating the class helpful by 4.0.

ADE- Alcohol and Drug Education:

6 participants completed this program during the quarter. Post-test determined there was a .68% improvement in knowledge, attitude, and behavior compared to pre-tests. Participants reported the class was very helpful (5.0).

RSAT – Residential Substance Abuse Treatment

24 participants completed this program this quarter. Post-test determined there was a .78% improvement in knowledge, attitude, and behavior compared to pretests. Participants rated the class helpful to very helpful by 4.69.

No services were provided at the Intervention Center January 1-18, 2021 and March 29-31 due to COVID-19 restrictions at the Intervention Center. Referrals were down for both male and female participants. Male RSAT Program and the IC used 228 units and the Female RSAT Program used 36 units during the quarter. Huron House consistently had referrals.

ARM – Anger/Rage Management – There were 16 post surveys completed. Participants improved knowledge in all evaluated areas with an average of plus .56. Participants found the class Very Helpful – 5.0

Men's DV class is going extremely well. Currently there are 20 participants attending virtually and 2 participants in person.

Record Compliance (Utilization Review)

- a. Residential – Visitor restrictions have loosened. Reviews were completed at River Bend 2 and Simpson in preparation for AFC license renewal inspections. Both facilities passed inspection.
- b. CISD – N/A due to COVID-19 restrictions. Reviews will be planned soon.

A recommendation was made by the records format committee to combine both the case record and medical record into one book vs having two separate books. The committee is waiting to find out from CMH if there are any changes to the format guideline before implementing this change. The Safety Committee is in the process of scheduling onsite inspections.

Individual Focused Services

- a. Consumer Complaints: Two disclosure of confidential information at Dorchester 2. Staff's babysitter had an emergency and dropped staff's children off without notice to the apartment. Staff failed to notify guardians of the situation and approval until an alternate plan was implemented (relief by another staff or someone to pick up the children).
Dorchester 1 – Services Suited to Condition violation. Staff left (2) individuals in the car

unsupervised to make a quick trip into the store. Involved staff received consultation, policy review, retraining and disciplinary action in accordance with Agency guidelines.

Corporate Compliance Complaints: N/A.

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

Staff Training: Training videos are now available by using a stream app. Terry will send instructions to all the supervisors on how to download the app. A training was developed on the virtual platforms used by the agency (Zoom, Lifesize and Teams), and updated COVID-19 training was also completed by all staff.

Business Goals

1. **Staff Recruitment/Retention:** The retention rates are as follows: October 98%, November 97%, December 96%, January 97%, February 98%, March 96% (staff who left the agency vs staff who remained). The state has funded an additional .25 cent per hour premium pay to all direct care staff April 1, 2021 thru September 30, 2021. Recruitment continues to be a challenge. The candidate pool is small. There is a lot of competition and less people who are out of work are applying due to continued 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). New guidelines now allow visitations inside licensed residential facilities. We have provided supporting documentation in response to a Heightened Scrutiny case at Simpson. A virtual meeting with a HCBS surveyor is scheduled on 04/23/21. Full implementation of the HCBS rules has been extended to March 17, 2023.

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 January 1-18 and March 29-31 due to increases in COVID-19 cases inside the IC. Classes have continued at the Huron House.

*Support and encourage local collaborative efforts to increase awareness.

*Prevention staff participate in coalition groups.

24/7 Dad Program. The Community Foundation approved a grant of \$3,500 in February. The class started on April 15, 2021. There are currently 5 Dads registered for the class.

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 beginning next quarter. Participating in weekly video series “Parents Perspective with Mike and Amy” live on the St. Clair County Health Department Facebook page. All Prevention Specialists have been active in Coalition either by attending meetings, developing, and presenting Jeopardy game, and participating in virtual activities for youth.

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 in Michigan, Wells, Charmwood and Vine. Currently working on the Michigan Road computer.

5. **Capital Improvement Plan:** The new conference room project has been completed and the room is being used for meetings and groups. The following projects have been approved by the board for this fiscal year: replacement of the boilers at River Bend, replacement/repair of concrete porches at River Bend, purchase of new dining room chairs for River Bend 1 & 2, purchase new dining room tables for River Bend 2, and purchase of a new passenger van. We are currently in the process of obtaining and reviewing bids for the new boilers and concrete so these projects can be scheduled before fall.

Adjournment/Next Meeting: The meeting was adjourned at 2:30 pm. The next meeting will be on July 14, 2021 at 1:00 pm.