

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

04/09/25

In attendance: Kris Curtis, Aaron Foote, Mike Thomas, Terry MacMillan, and Denise Ellery

Meeting minutes – The meeting minutes from 01/08/25 were previously approved and presented to the Board of Directors with the FY24 Annual Report in February.

## **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: There were no volunteer activities this quarter
- b. Community Inclusion Activities:

Belle River – Various shopping and restaurant outings, sensory rides, library

Charmwood – Various shopping and restaurant outings, sensory rides, hockey game, Snowflake Ball, movie theater, Sweetheart Dance

Michigan – Sensory rides, shopping, restaurants, park, nature walk

River Bend #1 – Various shopping and restaurant outings, bowling

River Bend #2 – Various restaurant and shopping outings, Snowflake Ball, bowling

Simpson – Sensory rides, restaurants, shopping, arcade, hockey game, park

Wells – Sensory rides, shopping, Goodells Park

Community Activities Committee: A Valentine Dinner/Movie group activity was planned for February at the Lions Club but had to be cancelled due to bad weather. The plan is to reschedule the movie or another Reptarium show. The Christmas party will be at the Knight Club this year.

2. Goal: Minimize number of medication errors

Objective: Prevent injury to residents resulting from medication errors

Performance Target: Zero Medication Errors

Medication Errors – (1) Error during the quarter. Bethuy SLA – Higher dose. No adverse reactions occurred from the error. The staff who made the error is scheduled for annual medication training at CMH. Previous quarter – (4) error.

## **St. Clair County Community Integration Services**

### **3. Goal: Quality Service Delivery**

Objective: Utilization Management Reviews

Performance Target: 90% accuracy

All (4) SLA locations were reviewed during the quarter. The Administrative Assistant is in the process of entering the survey information into the database. The results will be reviewed and an action plan will be developed for any areas needing to be addressed. Overall, there improvement has been noted.

## **Prevention: Alcohol & Other Drugs/Addictions**

### **4. 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.

Basic Drug Education (BDE) – Total certificates issued – 85

I.M.P.A.C.T. – 21 pre and 18 post; Intervention Center – 74 pre and 39 post surveys

Improved knowledge – plus 0.61

4.66 report the class was very helpful

98% reported they would use the information learned

RSAT – Residential Substance Abuse Treatment – Total certificates issued – 50

Huron House – 25 pre and 23 post surveys; Intervention Center – 30 pre and 30 post surveys

Improved knowledge – plus 0.81

4.68 reported the class was very helpful

94% reported they would use the information learned

Responsible Thinking – Total certificates issued – 63

I.M.P.A.C.T. – 17 pre and 8 post surveys; Intervention Center – 54 pre and 29 post surveys

Improved knowledge – plus 0.62

4.73 reported the class was very helpful

100% report they would use the information learned

ARM – Anger/Rage Management – Total certificates issued 36

I.M.P.A.C.T. – 9 pre and 6 post; Intervention Center – 39 pre and 15 post surveys

Improved knowledge - plus 0.85

4.73 reported the class was very helpful

100% reported they would use the information learned

Battering Intervention – Total certificates issued – 19

I.M.P.A.C.T. – 11 pre and 11 post surveys; Intervention Center – 4 pre and 4 post surveys

Improved knowledge – plus 0.61

4.93 reported the class very helpful

Active Parenting Birth to Five – Total certificates issued – 1

I.M.P.A.C.T.- 1 pre and 1 post surveys

Improved knowledge – remained the same

5.0 reported the class very helpful

Active Parenting 6 plus years – Total certificates issued – 3

I.M.P.A.C.T. – 4 pre and 3 post surveys

Improved knowledge – plus 0.85

5.0 reported the class very helpful

TAM (Teen Anger Management) – Total certificates issued – 5

I.M.P.A.C.T. – 5 pre and 6 post surveys

Improved knowledge – plus 0.20

3.67 reported the class very helpful

33% reported they would use the information learned

### **Record Compliance (Utilization Review)**

- A. Residential – Unannounced reviews of resident allowance funds and petty cash were completed at Michigan, Wells, Simpson and Charmwood. All the funds were accounted for. The remaining locations will be completed in the next two weeks (River Bend 1, River Bend 2, and Belle River).
- B. Utilization Management Reviews – A review was completed at Simpson Road Home. There were a few AFC resident rights that need signature and Supervisor IPOS training logs need to be filed. Historical records are in the process of being filed. Overall, the UM was very positive. The plan of correction for River Bend 2 is still in process and will be followed up on. Both Simpson and River Bend 2 are due for AFC Licensing renewal inspections in May.

### **Individual Focused Services:**

- A. Consumer Complaints: The CMH ORR substantiated the following violations at the Michigan Road Home - (1) Mental Health Services Suited to Condition, (3) Abuse Class II (unreasonable force) where staff used improper techniques during a behavior. (1) violation of the Recipient Rights regulations regarding video recording (staff videotaped a resident and shared that video on Snap Chat) at Michigan Road Home. This violation is also a HIPAA violation. (1) Freedom of Movement violation. Wells - (1) Mental Health Services Suited to Condition violation. Belle River – (1) Mental Health Services Suited to Condition, (1) Dignity and Respect and (1) Abuse Class III. Simpson – (1) Mental Health Services Suited to Condition (sleeping on shift). Administrative action was taken with all involved staff up to and including re-training, reassignment, and termination of employment.

Discussion on having CMH ORR attend staff meetings to complete the annual RR refresher face to face with staff. Will also review with supervisors that CMH Supports Coordinators and/or Clinicians are allowed more than 30 minutes if needed to properly address concerns, training, etc. at staff meetings. This will be discussed at the next Supervisors' Meeting on April 15<sup>th</sup>.

- B. Management Skill Development Program – Supervisors/Assistant Supervisors are accessing the training program. The new supervisor at Michigan Road will be added to the account

### **Corporate Compliance Complaints:**

- A. Recipient Rights violation reported under Individual Focused Services regarding the video recording of a resident and sharing the video is also a Corporate Compliance violation.

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

**Staff Training:** New FTA policies have been added to the annual evaluation for all Safety Sensitive staff. The training folder has been updated.

**Business Goals**

1. **Staff Recruitment/Retention:** The retention rates are as follows: March 97%, April 100%, May 97.3%, and June 99%, July 97%, August 97%, September 97%, October 98%, December 98%, January 98%, February 96.2%, March 97% (staff who left the agency vs staff who remained). Staff received a \$10 Valentine's Day Tim Horton gift card and a 3% bonus in March. Recruitment ads were also run on Zip Recruiter, and we continue to offer a \$1,000 sign on bonus and a referral program.

2. **Prevention Services (Alcohol & Drug Education):**

- a. Increase community awareness of prevention services – Upcoming events include the Community Resource Fair and Fun & Fitness Day.
- b. Prevention electronic orientation process – the process has been completed and seems to be working well. This goal has been completed.

The Teen program has been reduced to one class and Coalition units are down. For these reasons we have submitted a request to Region 10 to transfer units from these programs to Basic Drug Education and Responsible Thinking so we can add an additional class for the remainder of the fiscal year.

Synar checks will begin the last week in April.

3. **IT:** Looking into pricing to purchase a backup FortiGate firewall to have on hand in case of failure.

Implemented idle timeout feature on the IMDATA App that will automatically close IMDATA if a user is idle longer than 15 minutes to provide better security.

Changing our VMware licensing period to coincide with our Veeam backup licensing for easier management during renewals.

Upgrading older Windows 10 desktops with under 265SSD to new Windows 11 desktops with 500GB SSDs.

4. **Capital Improvement Plan:** The two 2025 Transit 14 passenger vans are still in production. We are getting an estimate from Cintas about how much it will cost to replace the aged River Bend fire suppression system.

5. **Health & Safety:** The 2nd quarter Safe Driving Award goes to River Bend 2. Operations was also recognized for improved scores. The overall safety score for the entire fleet was 85%.

**Adjournment/Next Meeting:** The meeting adjourned at 2:30 pm. The next meeting will be on July 9, 2025.