

CUYAHOGA COUNTY COMMUNITY MENTAL HEALTH BOARD

QUALITY IMPROVEMENT COMMITTEE

January 5, 2005

Quality Improvement Committee Chair, John Bazyk, called the meeting to order at 1:30 p.m.

Present: John Bazyk, Eugenia Cash, Joan Leeb, Michael Mullin, Ericka Thoms, Mary Warr

Also present: Bonita Caplan, Jesse Waller

Board Staff: William M. Denihan, Chief Executive Officer; Kathryn Burns, M.D., Chief Clinical Officer; Rose Fini, Director of Risk Management; Judy Jackson-Winston, Clients Rights Officer; Craig Fallon, Consumer Relations Specialist; Terry Lester, Adult Project Administrator; Michael Doud, Residential Project Administrator; David Wesner, Manager of Quality Improvement; Kathleen LoPresti, Quality Improvement Specialist; Paulette Baglyos, Compliance Audit Specialist; Karen Frena, Provider Relations Specialist

1. APPROVAL OF MINUTES: Ms. Leeb moved for approval of the Q.I. Committee minutes from the November 10, 2004 meeting. Seconded by Ms. Warr, the minutes were approved as written.

Follow-Up: Feedback from Clients Rights Officer, Judy Jackson-Winston

Ms. Jackson-Winston clarified that any time a complaint and/or grievance from an adult care facility, or an allegation of abuse or neglect is received, the Board's Clients Rights Officer (CRO) investigates the allegation. However, the Ohio Department of Health has jurisdiction over adult care facilities in Ohio. Ms. Jackson-Winston noted that the CCCMHB does not have the jurisdiction to close adult care facilities but does have the authority to investigate allegations and report its findings. For serious allegations, clients can be moved to another site; however, the facility can retain its license unless the Ohio Department of Health attaches it.

Outreach efforts are undertaken to educate and inform consumers of their rights with participants of the Adult Consumer Advisory Council, Brown Bag luncheons, Clients Rights Focus Groups, and through the use of the Clients Rights videotape. Mr. Waller expressed his interest in promoting the importance of treating consumers of mental health services with dignity and respect. Discussion followed on the concept of reporting complaints; it was noted that receiving complaints from consumers also indicates that consumers are being empowered to assert themselves. Mr. Fallon added that the Annual CRO Summary Report helps agencies to see where they may need to improve.

2. CHIEF CLINICAL OFFICER'S REPORT

- **Hospital/Community Bed Day Report** – Dr. Burns reported that for November 2004 the CCCMHB was 100 bed days under its bed day projection for the month; the year-to-date overage stands at 180 days. Bed day numbers for December have not yet been received from the Ohio Department of Mental Health.
- **Central Pharmacy Utilization** – At the end of November (5/12's of the fiscal year) agencies seem to be managing within their allocation. However, three agencies are currently over utilizing Central Pharmacy-- Far West Center, North East Ohio Health Services and Recovery Resources.

3. AD HOC Q.I. COMMITTEE INPUT REGARDING AGENCY REVIEW TEMPLATE

The Ad Hoc Q.I. Committee met on 12/22/04; the goal of the meeting was to brainstorm and discuss the concept of an Agency Review process for the Quality Improvement Committee in 2005. Mr. Bazyk elaborated on the meeting discussion points listed below:

Concepts/Feedback:

- Consumer satisfaction surveys
- Reports from agencies on what they are doing well, their challenges and how the issues/situations were handled and/or improved.
- Review of system issues
- Review of required elements of Performance Improvement Reports
- Evidenced Based Practices
- Utilize information already reported
- Provide agencies an array of choices on which to present to Q.I. Com.

3. AD HOC Q.I. COMMITTEE Update, (Continued)

Barriers:

- Confidentiality; lack of anonymity
- Necessity of agencies being asked for another layer of information requiring staff time

No real conclusion was reached by the Ad Hoc Q.I. Committee; however, it was suggested that Performance Improvement data submitted to ODMH from three "anonymous" agencies might be reviewed by Q.I. Committee members in an effort to select approximately four focus areas of review. It was noted that areas addressed in the agency's Performance Improvement Surveys identify those areas needing improvement.

ACTION: Mr. Bazyk suggested that the Ad Hoc Committee Input/Discussion be addressed by the Executive Committee. Ms. Caplan suggested sharing with members of the Executive Committee the list entitled, "Focus Areas for Future Meetings" compiled by the Q.I. Committee earlier in 2004.

4. OLD BUSINESS

Dr. Burns noted that, as requested, the document entitled, "Appendix E: Evidence-Based Practices Survey Instruments" to the Center for Community Solution's Community Needs Assessment was provided for both committee and audience members. Based upon the Strategic Plan, meetings were held with adult and children service providers to identify two best practices to focus on utilizing the limited funding pool. Funds will support obtaining additional information and training. Participation by agencies would be on a voluntary basis. The best practices selected by the agency workgroup are shown below:

- For Agencies Serving Adults:
 - Integrated Dual Diagnosis Treatment Model for Individuals with Co-existing Mental and Drug Disorders
 - Illness Management and Recovery for Individuals with Severe Mental Illness
- For Agencies Serving Children and Adolescents:
 - Teaching Family Model
 - Cognitive Behavior Therapy

5. NEW BUSINESS

The Chair suggested that the Implementation of the Consumer Survey Project for FY05 be addressed at the February Q.I. Committee meeting.

6. PROPOSED AGENDA ITEMS FOR FEBRUARY MEETING

- Performance Improvement Survey
- Implementation of Consumer Survey Project for FY05

There being no further business, the meeting adjourned at 2:50 p.m.

Submitted by: Carol Krajewski, Executive Specialist to the Board of Governors

Approved by: John Bazyk, Quality Improvement Committee Chair