

**CUYAHOGA COUNTY COMMUNITY MENTAL HEALTH BOARD**  
**QUALITY IMPROVEMENT COMMITTEE**  
**September 3, 2003**

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

**Present:** John Bazyk, Joan Leeb, Ella Patterson, Joan Schmetzer      **Absent:** None

**Also present:** Ann Hull

**Board Staff:** Kathryn Burns, M.D., Chief Clinical Officer; Cassandra Richardson, Chief Financial Officer;

**1. APPROVAL OF MINUTES:** Ms. Schmetzer moved to approve the minutes of July 2, 2003. Seconded by Ms. Leeb, the minutes were approved as written.

**2. AGENCY REVIEWS:**

Dr. Burns, CCCMHB's Chief Clinical Officer, noted that (1) agencies' budget information reflected the FY03 contract amount since the system is just starting its FY04 contract and (2) narrative descriptions from agencies regarding recovery implementation were included with grids.

<b>MURTIS H. TAYLOR MULTI-SERVICE CENTER</b>
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**Agency Representative:** Debbie Chickering, Chief of Quality Improvement; Roberta Taliaferro, Chief Clinical Officer; John Chan, Chief Financial Officer and Chief Operating Officer

**Mission:** To serve and empower individuals and families to function effectively and strengthen communities. This will be achieved by providing high value and high quality human services, behavioral healthcare, and community programs.

**Areas of excellence:** By all reports, agency accepts all referrals. Developed med/som "walk-in" clinic to address consumers' needing medication refills or follow-up. A liaison has been assigned to state hospitals who is always on top of MHT client discharge planning and outpatient treatment needs. A liaison has been assigned to the county jail to maintain contact with incarcerated MHT clients and ensure continuity of care upon release.

**Agency Representative Feedback:**

- Agency has enlarged and reorganized its entitlement department.
- RAP (Reaching Adolescents Program) This program is designed to reach out to transitional youth (16-22 years old); who often fall through the gap between the children's and adult services.
- Increased clients by 400; additionally successfully transitioned 200 clients from Center for Families and Children and are providing services to another 100 clients in the Glenville community.
- The efforts, referenced above, were not expansions as existing staff were utilized.
- Agency feels lucky to be a truly multi-service center within the NE area of Ohio; the integration of individuals using the multi-service center helps to impact stigma.

<b>NORTH EAST OHIO HEALTH SERVICES</b>
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**Agency Representative:** Roknedin Safavi, M.D., C.E.O. & Medical Director; Sandy Kimble, Director of Quality Improvement & Research; Esther Pla, Chief Operating Officer

**Mission:** To enhance individual and community health by offering a comprehensive, cost effective, integrated system of care focusing on behavioral health that promotes wellness, healing the quality of life to those individuals and families requiring our services. This is done in a spirit of partnership with the consumers and their families in an effort to reduce and minimize the adverse effects of mental health problems in individuals, families and groups.

**Areas of Excellence:** Outstanding special programs such as CSP treatment team for hearing impaired and perinatal mental health services to moms.

Dr. Burns noted that NEOHS was successful in bringing Central Pharmacy in line. The agency could be more assertive in its efforts toward potential discharge planning and placements in between discharge planning meetings at both NBHS campuses. Agency representatives do attend meetings; however, not much movement seems to occur between the meetings.

**Agency (NEOHS) Representative Feedback:**

- Agency agrees with Dr. Burns' comments regarding the need to focus on discharge planning.
- Agency has recently hired two CSP supervisors which should help to improve this situation.
- NEOHS is only one of two agencies who have developed a med-som clinic. This program has helped to move people into a less intensive level of care.
- Average caseload is 50, which does not include med-som clients.
- A short waiting list does exist for children and adolescent psychiatric appointments.
- A full array of services are offered to clients who are hearing impaired.
- NEOHS' operating principle stresses the importance of a back-up system to address the emergency need of an individual.

**PSYCHOBIOLOGY CLINIC**

**Agency Representatives:** Dorit Seed, LISW, Acting Administrator

**Mission:** To provide treatment and rehabilitation of persons suffering from serious psychiatric disorders through excellent psychiatric and psychosocial care, quality clinical research, and education, and to facilitate recovery and empowerment of mental health consumers and their families in order to enable them to function effectively in the community.

**Areas of excellence:** Very responsive and timely with state hospital referrals for outpatient care.

Dr. Burns noted that Psychobiology Clinic is a Medicaid-only agency. Several meetings have been held to determine difficulties in the fiscal area as the YTD Medicaid billings are at 6% when they should be at 100%. Dr. Burns explained that the Acting Administrator has inherited the outstanding issues. The Q.A. Plan has been received; however, quarterly reports are still outstanding. It was noted that the agency is certified for med-som and CSP services.

**Agency Representative Feedback:**

- Currently, efforts are underway to work with a Q.A. consultant to address outstanding issues and documentation and/or reports.
- Efforts are needed to focus on Q.I. requirements.
- Agency needs to work on its Clients Rights Survey.
- Billings are now being handled by a separate billing agency.

**ACTION:** In response to the Chair's inquiry about follow-up, Dr. Burns noted that follow-up reports can be made regarding Q.I. progress made by the Psychobiology Clinic. It was noted that billing information is reported out monthly in MACSIS reports provided to all Board members.

**ST. VINCENT CHARITY HOSPITAL – PSYCHIATRIC EMERGENCY DEPARTMENT**

**Agency Representatives:** Josephine Jones, Director of Psychiatric Emergency and Ambulatory Services; Carrie Bohm, Manager of PED and Q.A. Coordinator

**Mission:** To provide effective intervention, assessment, treatment and disposition services to persons experiencing mental health crises and/or emergencies regardless of their age, race, sex, creed, or financial ability to pay. The Psychiatric Emergency Department attempts to stabilize clients in the least restrictive manner, and to refer to on-going, appropriate, community-based mental health services.

Dr. Burns noted that the FY03 contract amount is for grant-funded non-Medicaid dollars. Dr. Burns reported that Mr. Alan Channing is no longer President and C.E.O. of the hospital. Mr. Jeff Jenning, the Chief Operating Officer, has been designated as the Interim President. Total clients served in FY03 was 3,363.

**Areas of excellence:** Consistent quality care. Always present and willing to assist in emergency services coordination and problem-solving. Excellent use of 23-hour hold service to reduce need for state hospital admission.

**Agency (SVCH's PED) Representative Feedback:**

- The Psychiatric Emergency Department has seven rooms, a small intake area with little privacy.
- The intake area has focused this past year on clinical excellence for patients as the hospital is responsible for both the medical and psychiatric condition of the patient.
- PED has adopted the Institutes of Medicine's benchmarks for psychiatric clearance in an attempt to assure that patients on both sides of the door (medical/psych) are treated with the same quality and same respect.
- Everyone goes through a triage regimen.
- Educational efforts have included the hospital's security officers who have been trained on de-escalation techniques and are aware of recovery books/principles.
- A grant has funded a community services associate in the waiting room for 8 hours a day. This person greets people and explains the system, its set-up, assists with transportation home, etc.
- PED has seen a lot of progress during the last three years and is now very visible.
- Three days of medication is provided to people who are going through a crisis.

**3. CLINICAL NOTES**

- **Update on Hospital/Community Bed Day Plan** - Bed day utilization for July, first month of FY04, is 12 days under the projection. Dr. Burns emphasized the importance of discharge planning as the projected bed day utilization figure for Cuyahoga County is 106 beds/day.
- **Update on Central Pharmacy Utilization** - CCCMHB recently learned that its state line of credit for Central Pharmacy was reduced about 12% from \$1,256,610 to \$1,104,428. Dr. Burns briefly highlighted preliminary recommendations for allocating the \$300,000 of local set aside dollars; details to be presented to the Operations & Finance Committee.
- **Coordination of Care with Criminal Justice System** – Carole Ballard, CCCMHB Forensic Specialist, held a meeting with agency liaisons at the County jail on 8/21/03. Dr. Burns reported that within a given month, there are 90 people at the jail who are connected to a community mental health provider. Currently, the following census figures were reported (Bridgeway - 4, CFC-16, Far West – 0, Mental Health Services – 10, Murtis H. Taylor MSC – 26, NEOHS – 5, Recover Resources – 25).

Dr. Burns advocated for better coordination between mental health and criminal justice. The focus group held for strategic planning specifically for criminal justice staff identified a very different perspective of outside stakeholders on what this system does for the clients that we serve. The assessment was not particularly favorable. Board members and audience members were encouraged to visit the Cuyahoga County Court of Common Pleas Web site to learn more about the mental health court at [www.cuyahoga.oh.us/common/](http://www.cuyahoga.oh.us/common/) and click on "News".

**4. OLD/NEW BUSINESS**

- Dr. Burns elaborated on the report entitled, Ohio Mental Health Consumer Outcomes System Report 2: Adult Symptom Distress, which looks at several outcomes and values.
- RE: Follow-up on Community Behavioral Health Center – A meeting was held with CBHC Executive Director, Arun Chattree, regarding concerns with major unusual incidents reported. Both parties agreed to go back over all of the unclosed cases to make a determination to see which cases would require a death certificate. Board staff has looked at refining the process. For instance, if a person is in hospice care and succumbs to cancer, in those instances, a death certificate will not be required. CCCMHB maintains that an official cause of death is necessary before closing a case to assure that proper care is being provided.
- Esther Pla, Chief Operating Officer/NEOHS, commended Carole Ballard for her efforts in coordinating the criminal justice meeting at the jail, for the eye-opening experience, and for her expertise in this area.

***There being no further business, the meeting adjourned at 3:15 p.m.***

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

***Approved by: John Bazyk, Quality Improvement Committee Chair***