# Mental Health PROGRAM/PLANNING & QI COMMITTEE MINUTES Tuesday AUGUST 20, 2002

PRESENT: Edward Berghorst, Mark Bombara, Kristine Nale, Veronica Persenaire

EXCUSED: Joyce Kortman, Kellye Slaggert

STAFF: Gerry Cyranowski, Sue Buist, Greg Hofman, Mary Moore, Gloria Pelon

### CALL TO ORDER - Chairperson

Veronica Persenaire, Chairperson called the August 20, 2002 meeting to order at 12:38pm.

### APPROVAL OF MINUTES of July 2, 2002

Motion: To approve the Minutes of July 2, 2002.

Moved by: Berghorst Supported by: Bombara MOTION CARRIED

### APPROVAL OF AGENDA of August 20, 2002

Motion: To approve the Agenda for August 20, 2002.

Moved by: Berghorst Supported by: Bombara MOTION CARRIED

### CMH STAFF PRESENTATION

Sue Buist, Program Director and Mary Moore, Medical Records Coordinator distributed information, provided an overview and answered questions regarding Clinical Requirements Relative to Medical Records Documentation.

The following paperwork/documentation required from beginning of service to closure was reviewed:

Access Screening/Triage (determines consumer's eligibility)

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	Access Screening/Triage (determines consumer's eligibility)	
	Registration Information	
	Service Agreement	
	Psychosocial Assessment - Health Screen	
	Release of Audio/Visual Information	
	Release of Information	
	Coordination of Care for Medical Health/Behavioral Health: Information from CMH Agency to	
Primary Care Physician		

Plan - Preplanning Conference - Essential Lifestyle Plan (ELP)
Plan
Progress Note
Plan-Status Report
Update/Referral/Transfer
Psychiatric Evaluation
Informed Consent for Mental Health Treatment Using Medication
Medication Review
Notice of Rights - PCP - Medicaid Recipient's Form
Notice of Rights - PCP - Non Medicaid Recipient's Form
Notice of Rights - Suspension/Reduction/Termination - Medicaid Recipient's Form
Notice of Rights - Suspension/Reduction/Termination - Non Medicaid Recipient's Form
Notice of Rights - Denial - Medicaid Recipient's Form
Notice of Rights - Denial - Non Medicaid Recipient's Form
Discharge Summary
Crisis Assessment

Committee members expressed their appreciation of the presentation; commenting that it was very comprehensive and very informative.

### **QUALITY IMPROVEMENT**

# **Behavior Management Committee - Performance Indicators**

Mr. Hofman reviewed and answered questions regarding the Behavior Management Committee Quarterly Report.

### **Information System Committee - Performance Indicators**

Mr. Hofman reviewed and answered questions regarding the Information System Committee Quarterly Report.

Mr. Hofman stated that it was discovered that most missing data was from crisis contacts. Staff have been informed how important the collection of data is and encouraged to gather as much as possible at the first contact. Missing data is sent back to staff, requesting follow through.

It was noted that data entry of diagnosis and income levels still needs improvement, but ongoing emphasis continues.

Nev	v requirements from MDCH:	
	Demographic and claims data to be submitted on a monthly basis versus quarterly.	
	Receipt of new procedures codes will require staff to be trained, with implementation	
scheduled for October 1, 2002.		

### **Environment of Care Committee - Performance Indicators**

Mr. Hofman reviewed and answered questions regarding the Environment of Care Committee Quarterly Report.

# State Comparative Data Through June, 2002

Mr. Hofman reviewed and answered questions regarding the State Comparative Data Through

June 2002.

Mr. Hofman discussed the following areas of concern:

Indicator #1: Access - Penetration Rate - Mentally III Child

Indicator #2: Access - Penetration Rate - Elderly

Indicator #3: Access - Penetration Rate - Ethnic Minorities

Indicator #11: Continuity of Care

Mr. Hofman stated that the above will need further analysis. He will provide an update on Indicators #1, 2, 3 and 11 at the October 1, 2002 Program/Planning & QI Committee Meeting.

### **PLANNING**

Update: Plan for Community Based Experience (CBE) Program for DD Consumers

Mr. Cyranowski stated that the original plan for CBE was to increase residential services within the consumers' homes versus their daily attendance at CBE. Four residential homes were reviewed, with approximately 22 consumers identified as possible candidates to receive increased residential services within their home. These were high risk individuals who are medically fragile.

After looking into the financial aspect of this new concept, it became apparent that the cost would be much more than anticipated. Due to this, a Task Force Group is meeting to determine a plan that includes moving away from site based services; not transporting consumers to receive skill building services at CMH sites. A maximum of one year or less has been set for implementation.

As this is a huge undertaking which will require an enormous amount of work and education, Mr. Cyranowski stated that he will provide the Program/Planning and QI Committee with a monthly status report.

### **OLD BUSINESS**

Update: Joint Commission on Accreditation of Healthcare Organizations

Mr. Cyranowski reviewed the results from the *Managed Behavioral Care Survey* conducted May 13 through May 17, 2002. He pointed out the final score of 94. National average score is not known.

Plan of Correction is being completed and will be sent meeting required deadlines. Upon completion, the Plan of Correction will be presented to the Program/Planning and QI Committee.

Mr. Cyranowski reviewed the results from the *Behavioral Health Care Survey* conducted May 13 through May 17, 2002. He pointed out the final score of 92. National average score is 87.

Plan of Correction is being completed and will be sent meeting required deadlines. Upon completion, the Plan of Correction will be presented to the Program/Planning and QI Committee

### **NEW BUSINESS**

None

# **ROUND TABLE**

Ms. Persenaire requested that the **September 3**, **2002 Program/Planning & QI Committee meeting be scheduled for 1:00pm.** 

# **ADJOURNMENT**

Ms. Persenaire adjourned the August 20, 2002 meeting at 2:16pm.