PROGRAM/PLANNING & QI COMMITTEE MINUTES Tuesday AUGUST 5, 2003

PRESENT: Edward Berghorst, Joyce Kortman, Kristine Nale, Veronica Persenaire EXCUSED: Mark Bombara, Kellye Slaggert STAFF: Gerry Cyranowski, Sue Buist, Greg Hofman, Betty O' Rourke, Gloria Pelon

<u>CALL TO ORDER</u> - Chairperson Veronica Persenaire, Chairperson called the August 5, 2003 meeting to order at 12:31pm.

APPROVAL OF MINUTES of June 20, 2003 Motion: To approve the Minutes of June 20, 2003. Moved by: Berghorst Supported by: Nale MOTION CARRIED

<u>APPROVAL OF AGENDA</u> of August 5, 2003 Motion: To approve the Agenda for August 5, 2003. Moved by: Berghorst Supported by: Kortman MOTION CARRIED

CMH STAFF PRESENTATION

Jane Longstreet, Team Leader, Adult Outpatient Program, distributed information, provided a Power Point presentation and answered questions regarding Dialectical Behavioral Therapy.

Ms. Longstreet explained that Dialectical Behavioral Therapy (DBT) is a type of cognitive behavioral treatment for people with borderline personality disorder. She reviewed the clinical criteria for Borderline Personality Disorder. A potential recipient of DBT must meet five or more criteria to be admitted to the group. As of May 2003, 112 CMHOC consumers have been diagnosed with this disorder.

Currently a DBT group meets in Grand Haven (11 members) and one in Holland (down to three current members). In a few weeks, new groups will begin with fourteen to fifteen participants. Four therapists conduct the skills training groups. Staff consultation groups meet weekly.

Ms. Longstreet noted that this is an expensive population to treat, however, since the implementation of DBT groups the following areas have shown a difference:

- □ 27 fewer crisis contacts approximate savings of \$4,023
- □ 160 fewer days in Robert Brown Center approximate savings of \$47,840
- □ 108 fewer hospital days approximate savings of \$71,280
- □ 37 fewer no shows approximate savings of \$2,849

Ms. Longstreet stated two goals:

- improve on the drop out rate
- 1 improve coordination with ProtoCall and others

Ms. Longstreet explained that a high drop out rate is due to the requirement that each member must sign an agreement and it is on a volunteer basis, no one can be forced to attend.

It was noted that the CMHOC Training Center has very good resources available to staff. They have acquired videos and some CD's.

Committee members were very appreciative of the presentation and found it to be very interesting and informative.

QUALITY IMPROVEMENT

Medication Committee - Performance Indicators

Mr. Hofman reviewed and answered questions regarding the Medication Committee August 2003 Report.

No systemic recommendations made at this time. Mr. Hofman stated that Medication Committee members continue to follow up on all errors.

Clinical Care Committee - Performance Indicators

Mr. Hofman reviewed and answered questions regarding the Clinical Care Committee August, 2003 Report.

It was noted that ongoing training for staff is a priority and will be provided in the following areas:

- □ writing comprehensive psychosocial assessments
- writing person centered plans that are clear and concise
- □ completing the Global Assessment of Functioning (GAF)
- □ providing evidence and support for Axis I Diagnosis.

Ms. Kortman questioned whether Mr. Cyranowski had reviewed the information she provided regarding the Michigan Model for protocols by Dr. Johnson; suggesting this information could be used for a future presentation to this committee or to the full CMHOC Board. Mr. Cyranowski will look into this.

Utilization Management Committee - Performance Indicators

Mr. Hofman reviewed and answered questions regarding the Utilization Management Committee August, 2003 Report.

It was noted that length of stay for inpatient hospitalization increased in June 2003.

No recommendations noted at this point; only areas to watch.

Behavior Management Committee - Performance Indicators

Mr. Hofman reviewed and answered questions regarding the Behavior Management Committee August, 2003 Report.

No recommendations noted at this time.

Information System Committee - Performance Indicators

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

Mr. Hofman stated that he is very pleased with the results, recognizing the ongoing efforts of Ms. Pelon and Ms. Luzum for their working with support staff to improve these indicators.

Mr. Hofman noted that since this report was written, another report was sent to the state on July 31, 2003.

Ms. Persenaire emphasized the need to continue to track and monitor the diagnosis performance indicator, as it dropped from 94% to 92% this quarter.

PLANNING

Mr. Cyranowski provided the committee with an update on the Needs Assessment process. He noted that the survey is in the fine tuning stage. The majority will be Internet based; minimal hard copy.

Four focus groups are scheduled to meet in September, 2003; a staff focus group will meet on August 12, 2003. The outcome will be presented at the October 20, 2003 CMHOC Board Meeting and Annual Public Hearing to be held at the Fillmore Complex.

Ms. Kortman questioned whether this committee or the full CMHOC Board will have an opportunity to review and comment on the survey. Mr. Cyranowski stated that today he could provide this committee with a copy to review and discuss, but due to time constraints, would not be able to send to the full Board.

Copies were distributed. It was noted that it takes less than ten minutes to complete.

Ms. Persenaire recommended that at least two questions be added to the survey that specifically target schools.

OLD BUSINESS

Update: Rates CMHOC pays to El Centro for Services they Provide

At the June 20, 2003 Program/Planning & QI Committee meeting, committee members requested

more information regarding the rates CMHOC pays El Centro for the services they provide. Mr. Hofman provided that information, reviewing and answering questions.

NEW BUSINESS

Information: Community Living Supports and Home Help Services

Ms. Buist distributed, reviewed and answered questions regarding Community Living Supports and Home Help Services.

Ms. Buist clarified the differences, noting that Community Living Supports is offered by CMHOC and is to teach, assist and guide consumers with various identified tasks/activities. It is available to both the mentally ill and developmentally disabled populations. Home Help Services is offered by FIA and provides the services for functionally limited individuals to remain in their independent settings for as long as possible and covers activities of daily living and instrumental activities of daily living. The latter provides the service for eligible people where the former assists and teaches eligible people to do these things for themselves.

Information: Utilization Management of Inpatient Hospitalization

Ms. Buist explained that the Utilization Management Committee closely monitors inpatient stays. This is reported quarterly to the Program/Planning and QI Committee. The Utilization Management Committee reviews the medical record to assure, among other things, that any hospitalization or rehospitalization is appropriate to clinical presentation of people admitted for more than 14 days, or who have multiple admissions in 30 days.

Ms. Kortman recommended that in the future data be captured on medical admissions of all CMHOC consumers. Mr. Hofman noted that this may be a future requirement.

ROUND TABLE

Ms. Kortman recommended that committee members read the *Detroit News*, July 20, 2003, on the Internet, relative to issues on mental health. Mr. Cyranowski stated that it is a three part article; therefore, he will copy the summary and include it in the August 25, 2003 CMHOC Board packet.

ADJOURNMENT

Ms. Persenaire adjourned the August 5, 2003 meeting at 2:08pm.

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