



**NORTH SOUND
MENTAL HEALTH ADMINISTRATION**

**QUALITY MANAGEMENT OVERSIGHT COMMITTEE
COMMITTEE MEETING PACKET**

March 22, 2006

QMOC GUIDING PRINCIPLES

The QMOC charge is to guide the quality assurance and quality improvement activities of mental health services within the NSMHA region. In assessing the necessary data and making appropriate recommendations, the QMOC members agree to the following:

- ◆ Help create an atmosphere that is SAFE.
- ◆ Maintain an atmosphere that is OPEN.
- ◆ Demonstrate RESPECT and speak with RESPECT toward each other at all times.
- ◆ Practice CANDOR and PATIENCE.
- ◆ Accept a minimum level of TRUST so we can build on that as we progress.
- ◆ Be SENSITIVE to each other's role and perspectives.
- ◆ Promote the TEAM approach toward quality assurance.
- ◆ Maintain an OPEN DECISION-MAKING PROCESS.
- ◆ Actively PARTICIPATE at meetings.
- ◆ Be ACCOUNTABLE for your words and actions.
- ◆ Keep all stakeholders INFORMED.

Adopted: 10-27-99
Revised: 01-17-01

March 22, 2006
NORTH SOUND MENTAL HEALTH ADMINISTRATION
QUALITY MANAGEMENT OVERSIGHT COMMITTEE AGENDA

Date: March 22, 2006
Time: 12:30 PM-2:30 PM
Location: NSMHA Conference Room
For Information Contact Meeting Facilitator Wendy Klamp, NSMHA, 360-416-7013

Topic	Objective	ACTION NEEDED	Discussion Leader	Handout available pre-mtg	Handout available at mtg	Tab	Time Allotted
Introductions	Welcome guests, presenters and new members		CHAIR				5 minutes
Review and Approval of Agenda	Ensure agenda is complete and accurate, determine if any adjustments to time estimates are needed. Meeting will start and end on time.	Approve agenda	CHAIR	Agenda			5 minutes
Review and Approval of Minutes of Previous Meeting	Ensure minutes are complete and accurate	Approve minutes	CHAIR	Minutes			5 minutes
Announcements	Inform QMOC of news, events and other important items		All				5 minutes
Comments from the Chair	Update the committee on recent developments that impact QMOC		GARY WILLIAMS				5 minutes
Membership Recruitment	Update on efforts to increase Consumer representation		WENDY				5 minutes

Topic	Objective	ACTION NEEDED	Discussion Leader	Handout available pre-mtg	Handout available at mtg	Tab	Time Allotted
	at QMOC						
Utilization Management Dashboard	Standing Agenda Item for monthly review	Review trends, NSMHA priorities	TERRY MCDONOUGH	Dashboard			5 minutes
Quality Management Department Report	Standing Agenda Item for Monthly Review	Review accomplishments, data and plans of department-recent staff retreat and re-assignments	WENDY KLAMP		QM Dept. Report		5 minutes
Quality Management Plan	Standing agenda item-review of QM plan		Terry		QM Plan		10 minutes
Integrated Report July 2005-December 2005	Review draft and discuss, recommend approval to BOD if acceptable	Approve report to go to Board	Diana		Integrated Report		20 minutes
Utilization Review Corrective Action Plans	Review provider plans to improve utilization following NSMHA reviews in 2005	None	Sandy		Provider UR CAP's		15 minutes
Critical Incident Policy and Form revisions	Approve revised policy and forms to Board	Approve	Debra		CI policy and form		10 minutes
Request for changes from the Associated Provider Network	Review request and determine how QMOC will be involved in any APN requested policy revisions	Determine approach by QMOC	Gary		List of changes		15 minutes
Date and Agenda for Next Meeting	Ensure meeting date, time and agenda are planned.		ALL				5 minutes

Topic	Objective	ACTION NEEDED	Discussion Leader	Handout available pre-mtg	Handout available at mtg	Tab	Time Allotted
*Review of Meeting	Were objectives accomplished? How could this meeting be improved?		ALL				5 minutes

Next meeting April 26, 2006

Potential Agenda Items

EQRO Draft Report

MATCH workgroup recommendations

Hospital Inpatient Reduction Work group recommendations

QRT Work Plan adjustments

Sea Mar Clinical Record Review results

North Sound Mental Health Administration
Quality Management Oversight Committee
NSMHA Conference Room

February 22, 2006

12:30 – 2:30

DRAFT MINUTES

Deleted: er

Present:

Gary Williams, QMOC Chair, Board of Directors,
Human Services Supervisor, Whatcom County
Janet Lutz-Smith, Whatcom County Advisory Board
June LaMarr, The Tulalip Tribes
Wendy Klamp, NSMHA Quality Manager
Mary Good, NSMHA Advisory Board
Russ Hardison, Sea Mar
Terry McDonough, Snohomish County Mental Health
ITA
Dan Bilson, NSMHA Advisory Board
Deborah Moskowitz, Skagit County Mediation
Services
Linda Carlson, Volunteers of America
Chuck Davis, Skagit County Mediation Services
Susan Ramaglia, NAMI Skagit
Maile Acoba, Skagit County Coordinator

Not Present:

Nancy Jones, Snohomish County Human Services
Janelle Sgrignoli, Snohomish County Human
Services
Mike Manley, Snohomish County Human Services
APN representatives (2)

Deleted: ¶

Others Present:

Kelly Foster- MHD
Tony O'Leary – MHD
Kathleen Daughenbaugh, WCPC
Diana Striplin, NSMHA
Greg Long, NSMHA
Debra Jaccard, NSMHA
Chuck Benjamin, NSMHA
Diana Striplin, NSMHA

Deleted: Dan Bilson, NSMHA Advisory Board

Deleted: Wendy Klamp, NSMHA Quality Manager

Deleted: Linda Carlson, Volunteers of America Mary Good, NSMHA Advisory Board

1. Open the Meeting & Comments from the Chair

Gary convened the meeting at 12:33 p.m. and introductions were made.

2. Agenda

Gary asked if there were any changes to be made to the agenda and none were made.

3. Approval of January Minutes

The minutes from the previous meeting were reviewed and two corrections were made to the attendance list. A motion was made to approve the minutes with those changes, motion seconded, carried.

Formatted: Bullets and Numbering

4. Announcements

Wendy congratulated *bridgeways* for their re-audit for licensing results as they passed with 97%. EQRO briefly visited the RSN as well as providers, feedback has not yet been given but a draft report should be sent in March. Wendy noted that EQRO stated they would like to thank providers for their time.

Janet noted that as a member of NAMI she has been receiving updates on legislative updates from Seth Dawson and feels this has been very informative. She will pass the information on to any who wish to receive it.

Greg noted that Fairfax Hospital has sent another letter threatening to stop providing ITA services for children. He is currently working on contingency planning, discussing options with King County, RSN and other providers.

Deleted: ¶

5. Comments from the Chair

Gary noted he expressed concerns from this committee to the Board of Directors regarding keeping QMOC involved as NSMHA policies are amended. The Board accepted Gary's report and was agreeable and understanding. Dan noted by law the Board is required to have an Advisory Board and QMOC, should be no question this group should supply information to BOD. Chuck Benjamin clarified that APN submitted a letter to NSMHA stating they would not sign a contract with the RSN. An executive committee of the Board held a meeting in which APN stated RSN policies and procedures exceed federal and state statutes, APN is permitted to submit a list of these aforesaid policies. This list is due Feb. 28th. Chuck stated he would distribute the list to QMOC as soon as he receives it. The review of these policies needs to be an expedited process, Chuck suggested QMOC setting a day aside to work on this issue, perhaps having APN present on their issues, then Gary presenting a report to the Board as chair of this committee. Dan asked if APN stated any specific laws or mandates being violated, Chuck responded they did not. Gary suggested to Chuck that regional staff review the list and make recommendations to QMOC, Chuck agreed.

6. Membership Recruitment

Wendy noted in response to Mary's request for more consumer representation at QMOC, she had addressed the issue at Advisory Board and County Advisory Board meetings. Margaret Rojas is also coming up with new ways to recruit. Wendy noted she is open to ideas. These do not need to be County specific membership slots. Dan suggested presenting at Rainbow Center. Wendy agreed and will prepare a speech and take it to Rainbow Center.

Wendy noted there is still no representative from APN. Wendy asked Jess Jamieson, APN president, via e-mail who would be new representative now that Terry Clarke and Joan Dudley are gone. He stated he would bring the issue up at APN management council. Janet asked if providers are required contractually to make staff available to attend committees, Chuck stated he believes they are and will research the issue. The committee decided to send a written request from the chair to request a representative from APN. Gary noted the need for consumer voice in the committee and as APN is the largest provider in the region they are an important part of the group.

5. Utilization Management Dashboard

Terry welcomed Kelly Foster and Tony O'Leary from MHD for attending, and Kathleen Daughenbaugh from WCPC who will talk about the trauma group occurring there. Terry directed attention to the monthly UM dashboard, available on the NSMHA website (<http://nsrsn.org>). Terry noted that Dennis Regan is working on graphs to determine correct penetration rates, it is closer to 8%. He will bring these graphs to the next meeting. Terry praised Santiago Iscoa and Nancy Anderson for their work keeping census cap at WSH down. Wendy updated that May 1st is target date for transitioning Access to VOA.

6. Quality in Action – WCPC Trauma Project

Gary informed visitors to the meeting that this committee has requested to have providers present on quality in action, and welcomed Kathleen Daughenbaugh, a psychiatrist at WCPC, to present on the PTSD treatment groups she has run for almost five years. She also maintains a trauma consult group for clinicians, and Kathleen will also meet with clinicians and clients. The clients who attend the group are mainly female survivors of childhood sexual abuse, ages from 20-50. A client must have a PTSD diagnosis and be qualified to have services at the clinic to be a part of the group. Kathleen noted it is now being recognized how to deal with people suffering from schizophrenia and PTSD, and that many clients thought to have schizo-affective disorder actually have PTSD. Greg asked if the group curriculum is structured enough to be duplicated by other people? Kathleen noted she has a general outline, there are

good resources available. Outcome measures for the group are to look at how people are doing, and if they have been accessing crisis services less. Chuck noted that Ombuds rarely has need to go to WCPC. June noted two therapists do this at Tulalip, Russ noted there is one PTSD therapist at Sea Mar. Wendy requested that the committee send a thank you letter to Kathleen for coming down to present.

8. QM Department Report

Wendy updated that the QM department is working with VOA on completion of the Access transition. Due to closure at Puget Sound Behavioral Health, the region had several days over cap at WSH in January, but we are now currently under census. A QM retreat was held to determine resource needs for RFQ, all are currently awaiting the Board of director's response to the amended budget request to provide additional FTE's.

Deleted: b

Deleted: h

9. QM Plan

Terry noted UM is doing ongoing record reviews and there will be a clinical record re-review at Sea Mar in March. Debra, Julie, Terry, Sandy will go out to providers and review about 100 charts a month for UR. Janet asked what criteria is used when reviewing denials, Terry noted they look at statewide Access to Care criteria. Terry noted that UM sends the consumer either a notice of action letter if UM agrees with denial, or an eligibility letter if overturning the denial, within two days of reaching their decision. The committee requested binders for each member of the committee with the QM Plan inside it.

Deleted: ¶

10. Critical Incident Report

Debra reviewed critical incident data from July-December 2005. She noted a pattern of incidents going down, looking at last three years data there are 20 less incidents than the Jul-Dec period 2004. The CIRC committee meets monthly to review all critical incidents and request reviews on incidents they have concerns with, with a goal of improving health and safety for consumers. Gary noted it is a good trend that less incidents are being reported, but what data verification is being done to catch unreported critical incidents? Wendy noted that when doing clinical record reviews and utilization reviews, serious incidents that have not been reported are specifically looked out for.

11. Everyday Creativity

Wendy presented a video on Everyday Creativity to the committee.

12. Performance Indicator Projects

Postponed until next months meeting.

13. UR Corrective Action Plan

Postponed until next months meeting.

14. Date and Agenda for Next Meeting

The next meeting will be held Wednesday March 22nd.

15. Adjourn

The meeting was adjourned at 2:35 p.m.

Respectfully submitted,

Shannon Solar

Please Note:

The attachments referenced herein are part of the official record and attached to the file copy. Please contact the NSMHA at 1-800-684-3555 if you have any questions, comments, or concerns.

March 2005 dashboard can be found at:

http://nsmha.org/Reports/Dashboard/20060307_Dashboard.pdf