West Virginia Quality Improvement Council Meeting

Advisory

April 20, 2011 10:00 am – 4:00 pm Schoenbaum Family Enrichment Center Charleston, WV

Members Present:

Kathy Yarbrough, Laura Helems, Marilyn Nichols, Clarice Hausch, Steve Wiseman, Bob Adkins (for Libby Collins), Amber Hinkle, Mike Grady, Liz Bragg, Jane Ketcham

Members Not Present:

Kim Farley, Virginia Gattlieb, Kevin Smith

Others Present:

Patricia Nisbet, Rose Lowther-Berman, Lori McGurty, Tina Maher, Nora Oscanyan

Meeting minutes from the 10/20/2010 QAI Council were approved as written.

MINUTES

✓ Minutes for previous meeting 01/19/2011 were approved as written.

Agenda	Membership	Committee	and	Presenter	Jane	Ketcham,	Lori
Item	Procedures Ma	anual			McGurt	ty	

Discussion and Conclusions

Purpose: Jane and Lori discussed BMS's primary purpose for this group. Essentially, the group is to develop a strategic annual Quality Improvement Plan and focus on the plan each quarter. Marcus Canaday has indicated he would like to see the group more focused on the plan with responsible parties, deadlines and specific goals/objectives for the council to work towards.

Bylaws and Documents: Steve noticed the council's name on the documents emailed prior to this council meeting had been changed to Quality Improvement Advisory Council. Lori/Pat explained that this had been done to ensure consistency and to reiterate the council's advisory purpose. Steve requested the group review the council's bylaws to ensure a name change is appropriate and if so, to update all the group's documents to reflect this change.

Membership and Election: The membership issues are still not resolved. The group is to have 15 members (5 of which must be program members or family members). The group decided to "draw straws" for 1, 2, or 3 year terms in order to phase in/out members. 1=term through 9/2011; 2=term through 9/2012; 3=term through 9/2013. If there are no replacements, an individual whose term is expired could stay on until the spot could be filled. Election of officers will be in October 2011.

Action Items	Person	Deadline
	Responsible	
Update QIA Council documents to reflect current processes/language/I/DD ManualProcedures Manual, public comment notification, membership vacancy document, list of membership vacancies, and membership		6/20/2011 *DONE
application.		

Notify Ginny and Kim their terms are over.	Lori McGurty	6/20/2011 *DONE
Fill 5 voting-member vacancies (1 provider, 2 general stake-holders, and 1 member/legal rep/family). Fill 3 non-voting member vacancies. *NOTE: Please see updated policy manual where it is indicated there are also 3 additional "non-voting" members who will attend meetings and be available to apply for permanent membership if a voting member leaves the council unexpectedly.	members	Ongoing
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Agenda OHFLAC Update Presenter Rose Lowther-Berman Item

Discussion and Conclusions

Rose presented that ResCare NorthCentral closed voluntarily.

Group discussed the request for OHFLAC to bring standard data/information to this meeting on a quarterly basis. Group requested and Rose agreed to provide the following in a standardized format for the group:

- 1 and 2) **Incidents:** Substantiated Incidents submitted to OHFLAC (quarterly report with anything that is identifiable as MR/DD Waiver with subcategories broken out for Abuse/Neglect/ Exploitation). –AND- this same information for general behavioral health submissions.
- 3) **Provider Issues:** Number of new MR/DD Waiver providers, number of providers who are having difficulty or are troubled concerning licensure, any regulatory or behavioral health changes.

4) **Surveys:** Anecdotal information or patterns found during OHFLAC reviews/surveys.

Action Items	Person Responsible	Deadline	
Prepare reports 1-4 from above and present	Rose	7/13/2011	(for
information to QIA Council on a quarterly basis	Lowther-	inclusion	in
	Berman	handouts	
		emailed	to
		council	
		members)	

Agenda Misc. New Business Presenter All Item

Discussion and Conclusions

1. Workforce issues: Discussion ensued about the continuing difficulty in hiring good direct care staff, especially in border counties. The group wanted information about rate differentials per county. Amber made a motion (Laura 2nd) to request that Pat Nisbet have a formal discussion with the Commissioner about I/DD Waiver provider workforce issues in border counties and how it is affected by reimbursement rates. It was noted that providers in Monongalia and Jefferson Counties in particular continue to experience extreme difficulty in hiring staff. Steve also indicated that a movement to promote supported employment in our state should be reflected in incentivized rates.

- 2. Laura indicated that Adult/Child Protective Services appear to handle Waiver member investigations very differently than non-Waiver ones. It brought about discussion concerning the difficulty providers have in ensuring that they do not hire individuals who have substantiated abuse/neglect findings. Mike made a motion (Laura 2nd) that BMS look at establishing a registry that would aid in not hiring individuals who have substantiated abuse/neglect findings.
- 3. The Certificate of Need vs. Summary Review Processes were discussed. The group voiced concern that the Summary Review Process does not always adequately review a potential provider to ensure they have a good solid business plan, proposed budget, etc. prior to approval of a Certificate of Need.

Action Items	Person Responsible	Deadline
1. Prepare a formal recommendation from the QIA Council to Pat Nisbet asked that she discuss the rate differential and workforce issues with BMS Commissioner.	Jane Ketcham	7/20/2011
2. BMS to be made aware of council's motion to request BMS to look at establishing a registry that would aid in not hiring individuals who have substantiated abuse/neglect findings	meeting and	n/a
3. Call Tim Adkins of the Health Care Authority to talk about what they require for a full CON. Research the full CON process vs. the summary review process to ensure the summary review process adequately ensures providers (agencies) are qualified prior to providing services. Determine if there is some method to notify other providers of the status of an I/DD Waiver provider navigating the process.	Pat Nisbet	7/20/2011

Agenda
ItemPublic Comment
PresenterPresenterN/A

Discussion and Conclusions

No persons attended and voiced public comment.

Action Items	Person Responsible	Deadline
None	N/A	N/A

Agenda	Review Data for Development of	Presenter	Jane Keto	cham, Lori
Item	the I/DD Waiver QIA Council		McGurty	
	Annual Plan			

Discussion and Conclusions

The FY2011 Discovery and Remediation Report and Eligibility End of Month Reports were shared with the council. Each item on the reports was reviewed with the council to discuss and determine if the data might be a good source for Annual Plan development. Review brought about discussion and request for additional data information.

Discussion brought about action items the council would like to consider in developing an Annual Plan.

an Annual Plan.		
Action Items	Responsible Person	Deadline
Review meeting minutes and prepare draft Quality Improvement Advisory Council Annual Plan to present at next meeting.	Jane and Lori	7/20/2011
Potential QIA Annual Plan Goals/Objectives	Person Responsible	Deadline
B6: Percent of requests to appeal eligibility determination which are processed within established timelines. Obtain data about the average length of time it takes to obtain a hearing decision upon submitting a hearing request.	ASO Lori McGurty	7/20/2011
B6: Advocate that eligibility appeal hearings result in an outcome within established timelines (90 days) upon receipt of data about length of time to obtain decision through Board of Review.	WV Advocates Clarice Hausch	Unknown
C1: Percent of MR/DD Providers who have an active behavioral health license. Review Summary Review, licensing and CON processes to determine if the licensing process scrutinizes agencies enough to ensure a new agency has adequate supports and a solid business plan. (ex. ADEPTO's prompt and early forced closure due to health and safety issues-Was that agency scrutinized enough to ensure member safety?)	BMS Pat Nisbet	Ongoing
 C3/C6: Percent of agency staff whose Abuse/Neglect (Consumer Rights) training is current. Reduce the incidence of abuse/neglect in the I/DD Waiver program Obtain accurate/current data from IMS and OHFLAC, Facilitate communication between IMS and OHFLAC databases, Reduce duplication of reporting abuse/neglect to IMS, OHFLAC and APS/CPS, Standardize training in abuse/neglect and consumer rights) Work towards developing a statewide APS/CPS registry. 	TBD	TBD
D6: Percent of members who utilized 80% to 120% of services indicated on the IPP. Develop and present statewide training on APS algorithm and budgetary model. Misc. QIA Plan Recommendations Not Related to I	ASO Data Reports (son	TBD

items indicated as action items above)			
Review and update all QIA Documents/processes to	TBD	TBD	
reflect intent			
Resolve the Provider of Last Resort Issue	TBD	TBD	
Tackle workforce problems (difficulty in obtaining	TBD	TBD	
qualified staff to work directly with program members)			
Continually develop the QIA Council's knowledge and	TBD	TBD	
understanding of relevant statewide issues- Council			
Development			

Agenda	Wrap-up and Confirm Upcoming	Presenter	Jane Ketcha	m
Item	Meetings			

Discussion and Conclusions

Meetings will continue to be the 3rd Wednesday from 10:00 am until 4:00 pm of the applicable month:

- January 19, 2011
- April 20, 2011
- July 20, 2011
- October 19, 2011

Action Items	Person Responsible	Deadline
Schedule Schoenbaum for next meeting 7/20/2011	Lori McGurty	

Meeting minutes	Lori McGurty	Date:	5/13/2011
submitted by:			