

West Virginia Quality Improvement Advisory Council Meeting	January 11, 2017 10:00am-4:00 pm Bureau of Senior Services
Members Present:	
Marilyn Nichols, Chair (Program/Family Representative); Kelly Miller (Program/Family Representative); Jeannie Elkins (Program/Family Representative); Marilyn Osborne (Program/Family Representative); Amber Hinkle, Vice-Chair (General Stakeholder Representative); Angie Breeden (General Stakeholder Representative); Susan Given, Disability Rights of WV (General Stakeholder Representative); Linda Higgs (DD Council); Chris Messenger (Provider Representative); Brian Breyer (Provider Representative)	
Members Not Present:	
Sheila Harper (Program/Family Representative); Jon Sassi (General Stakeholder Representative); Georgette Hensley (Provider Representative)	
WVDHHR and UMC Representatives Present:	
Pat Nisbet (BMS); Taniau Hardy (BMS); Steve Brady (BBHFF); Rose Lowther-Berman (BMS); Teresa McCourt (SFC Program); Vanessa VanGilder (Olmstead Coordinator); Leah Redden (KEPRO); Sissy Johnson (KEPRO); April Goebel (KEPRO)	
WVDHHR and UMC Representatives Not Present:	
Laura Barno (BCF); Jim Cooper (OHFLAC); Lori McGurty (KEPRO)	
Ancillary Members Present:	
Richard Covert; Mary Lea Wilson	
Ancillary Members Not Present:	
Todd Rundle	
Public Present:	
Meeting Minutes from October 2016 - Approved	

MINUTES

Agenda Item	Welcome, Approval of October 2016 Minutes	Presenter	
Discussion and Conclusions:			
<ul style="list-style-type: none"> • Call to Order: The meeting was called to order at 10:04 am by Marilyn Nichols, Chairperson. • Approval of Minutes <ul style="list-style-type: none"> ○ Jeannie Elkins moved to approve minutes and Marilyn Osborne seconded. Minutes approved by majority. 			
Action Items	Person Responsible	Deadline	
NONE			

Agenda Item	General Updates	Presenter	Pat Nisbet/Taniau Hardy - BMS April Goebel - KEPRO Randy Hill - PPL
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Discussion and Conclusions:

- **BMS**
 - Taniau Hardy discussed the 18 member deaths that were reported since October 2016.
 - 2 hospital deaths out of state (ages 54-ISS and 25-NF)
 - 8 natural deaths of individuals who lived in ISS (ages 74, 64, 74, 56, 64, 88, 83, and 53)
 - 1 accidental death of individual who lived in ISS (age 47—complications from a previous motor vehicle accident)
 - 7 natural deaths of individuals who lived in NF (ages 8, 22, 66, 7, 16, 17, and 42)
 - Marilyn Osborne introduced discussion about the deaths reported for younger individuals, specifically whether they were preventable.
 - Taniau Hardy said a nurse reviews and identifies if a death is suspicious.
 - There was further discussion on whether primary care providers have the tools necessary to provide proper care for individuals with I/DD who are at higher risk medically.
 - Susan Given stated she was concerned with the cases of pneumonia for which history was not provided. She asked if a mortality committee conducts reviews and if so what do those reviews encompass. Ms. Hardy confirmed a mortality review group compares the death certificates to the provider’s notes and determines if there is anything suspicious.
 - Discussion ensued concerning aspiration and potential precautions in various I/DD Waiver settings. Based on this discussion the council decided to form a sub-committee to develop educational materials for providers.
 - Pat Nisbet addressed upcoming slot releases.
 - There will be seven in March 2017.
 - There was a question about how slots are released, specifically those that are not used due to death or other circumstances. Current policy requires that any slot used during a fiscal year may not be released until the next fiscal year.
- **KEPRO:**
 - April Goebel presented the Discovery and Remediation Report.
 - Ms. Goebel pointed the council to item G10 – Member-specific crisis plan.
 - Ms. Goebel stated there are several criteria required for a plan to be considered compliant. Frequently plans reviewed include most requirements but not all, resulting in reporting that does not meet the CMS compliance threshold of 85%. As a result, KEPRO will conduct training with providers at the February Quarterly

Provider Meeting.

- Amber Hinkle stated families are often resistant to the development of a formal crisis plan. The agency works with families to ensure plans are developed per requirements.
- **PPL:**
 - Randy Hill provided the activity report for PPL.
 - PPL received eight referrals in December.
 - Mr. Hill informed council that a worker registry is currently under development. This registry, when completed, will allow those who receive services via the Traditional with Personal Options Service Delivery Model to have contact information for staff persons who may serve as backup.
 - There is not a date yet for completion of the project.
 - PPL is currently working on implementing a new payroll schedule change and members will receive information via mail and email when this schedule is implemented.
 - PPL will undergo a Payment Error Rate Measurement (PERM) audit.
 - The audit has been initiated through CMS; PPL will be required to demonstrate that certain procedures are medically necessary. PPL must submit requested information to CMS by 1/27/17.
 - Additional discussion occurred concerning House Bill 2885, which restricts legal guardians from being paid to provide services unless the court grants an exception. Ms. Goebel will clarify with BMS and update the Policy Clarifications addressing which entity (PPL or the provider agency), is required to maintain the required court documents.
 - Susan Given asked if there had been any additional discussion on the Traditional with Personal Options Service Delivery Model allowing for payment for Workers Compensation insurance, sick days, vacation days, etc. Mr. Hill stated there has not been any discussion regarding these concerns for some time, but in other states, PPL does cover Workers Compensation. He further clarified that if PPL does provide these benefits, they would be available to all employees and ultimately be funded through the individuals' annual budgets.

Action Items	Person Responsible	Deadline
Update Policy Clarification to indicate who is responsible for obtaining and maintaining the court's approval for a guardian to be a paid provider through IDD.	April Goebel	Next meeting

Agenda Item	Draft Handbook Review and Approval Membership Flier Review and Approval	Presenter	Group
Discussion and Conclusions:			
<ul style="list-style-type: none"> ● Draft Handbook Review and Approval <ul style="list-style-type: none"> ○ Leah Redden made revisions as the group discussed the handbook. <ul style="list-style-type: none"> ➤ PAGE 2 - ICF/IDD change to ICF/IID ➤ PAGE 3 – change to WVUCED; WV Advocates to Disabilities Rights of WV 			

- PAGE 4 – Training and Orientating New Members
 - Ms. Redden stated this included providing new members with the handbook and minutes from the previous meeting. Jeannie Elkins recommended including a membership roster as well. Susan stated and council agreed to amend this item from ‘Training and Orientating New Members’ to ‘Orienting New Members’.
- PAGE 5 – Membership Attendance
 - Membership committee questioned if the council wanted to keep attendance guidelines as stated in the handbook.
 - Susan Given stated she believed members should be removed from the council after missing two consecutive meetings. After discussion, council agreed to these terms and agreed no notice will be sent after missed meetings. Notice will be sent, however, once a member has been dismissed from the council due to non-attendance.
 - The council discussed continuing to offer a conference call option for meeting attendance. The conference call option will be explained in the handbook, including noting that, if there are no attendees after 30 minutes, the call will be terminated.
- PAGE 6 – Agenda Development
 - Linda Higgs asked for clarification about how the agenda is developed. Ms. Redden informed Council that prior to each meeting she meets with the council chairperson, Taniua Hardy, and April Goebel via conference call to develop the agenda.
 - The handbook statement “council meetings will follow an agenda to be developed by the Chair and designated person” to “council meetings will follow an agenda to be developed by the Council Chair, BMS, and the Operating Agency.”
- PAGE 7 – No changes were made.
- Linda Higgs moved to accept the handbook as amended and Susan Given seconded. Handbook approved by majority.
- **Membership Flyer**
 - Council discussed and agreed to change the colors on the flyer to ensure all information can be easily seen. Vanessa VanGilder asked about including a contact telephone number so that interested individuals can request more information as well as a statement that the council meets quarterly. Ms. Redden will update the flyer with this information and forward to the original group for review.
 - Susan Given asked about shortening website address from three lines. Ms. Redden will complete this update.

Action Items		Deadline
Make changes to flyer, send out for review	Leah Redden	February 1, 2017

Agenda Item	Public Comment	Presenter	Public
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Discussion and Conclusions:		
<ul style="list-style-type: none"> No public comment 		
Action Items	Person Responsible	Deadline
NONE		

Agenda Item	Data Set Analysis Sub-Committee: Status Report	Presenter	Rose Lowther-Berman, BMS
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Discussion and Conclusions:

- Rose Lowther-Berman provided the Statewide Transition Plan Report to QIA, accurate through December 30, 2016.
 - Dr. Lowther-Berman explained that the numbers represent providers who have received a HCBS settings review and the levels of compliance. Specifically, she indicated that no agencies were found to be in full compliance at the initial review, but during re-evaluations, more were found to meet requirements. Some providers require further evaluation; these are ongoing. The council was also informed that if a setting does not meet requirements by the March 17, 2019 deadline, members will be transferred/transitioned to another provider.
- Appendix G of the Statewide Transition Plan was also provided to council members.
 - This appendix details the assessment, remedial action, and public input/stakeholder engagement/oversight program components. The council requested that the items for which the council is responsible be communicated. Ms. Redden and Ms. Goebel will develop a list of QIA council action items, which will be forwarded to Dr. Lowther-Berman, Ms. Nisbet, and Ms. Hardy. Dr. Lowther-Berman will present to the council at the April 2017 meeting and sub-committees will be formed at that time.
 - Dr. Lowther-Berman stated that numerous providers have asked for training on the HCBS requirements and informed council that development is under-way.
 - Webinar information will be forwarded to the council when completed.
- Ms. Higgs asked if there are different levels of approval; Ms. Nisbet confirmed that the approval granted October 2015 is provisional. It was asked if the plan may change due to the political climate and Ms. Nisbet confirmed that updates can be made.
- Amber Hinkle asked for clarification on how the state is addressing the issue of reverse-integration. Initially it was reported that practices such as bringing members of the community into a setting would meet HCBS requirements, but CMS later clarified that this is reverse-integration, which by itself does not fulfill the integration requirements. BMS indicated that the transition plan has been approved by CMS and will be carried out as such.

Action Items	Person Responsible	Deadline
Identify QIA Council action items on the Statewide Transition Plan and forward to BMS	April Goebel and Leah Redden	February 1, 2017
HCBS Webinar information sent to QIA Council members	Rose Lowther-Berman	Next meeting

Agenda Item	Pneumonia Prevention Handout	Presenter	Group
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Review and Approval

Discussion and Conclusions:

- A power-point entitled “Health Risks Associated with Developmental Disabilities” was developed by Marilyn Osborne and a sub-committee.
 - BMS will submit the power-point to their Communications Department for review; when approved, it will be disseminated to providers and other stakeholders.
- Additional discussion regarding health risks took place. Specifically, because this population is at higher risk for health issues, the council would like to increase awareness about how to address them.
 - Ms. Osborne indicated that dental problems can lead to a host of other, potentially serious, health issues. As such, the council indicated that educational materials on proper dental care may be beneficial. Pat Nisbet volunteered to reach out to the State Dental Director and request materials.
 - The group also identified that, though an Annual Physical is not a program requirement, most members would benefit from such an evaluation. As such, the group will form a sub-committee to revise the previous Annual Physical form so that it can be made available as a means to encourage individuals to see their physician.

Action Items	Person Responsible	Deadline
Submission of power-point to BMS Communications Department	Pat Nisbet	February 1, 2017
Dissemination of power-point to provider distribution list and other stakeholders	April Goebel/Leah Redden	Next meeting
Contact State Dental Director for dental care materials	Tania Hardy/Pat Nisbet	Next meeting

Agenda Item

New Review Tool Update

Presenter

Leah Redden, KEPRO

Discussion and Conclusions:

- Leah Redden presented the updated tool used for provider reviews. Changes were made to include new policy and use of the tool with the changes was implemented effective January 1, 2017. The following updates were made:
 - WV CARES: use of WV CARES for staff background checks was implemented March 1, 2016. Prior to that date, new hires were required to complete a CIB. Kepro staff will monitor both at review, depending on the date of hire.
 - Competency-Based Training: a score of 80% or higher is required for an employee to be considered competent in several training areas, such as Confidentiality, Member Rights, and Infectious Disease Control. Providers are required to maintain evidence of competency in personnel files.
 - Use of Personal Vehicles: providers are required to verify that personal vehicles used to transport members meet current registration requirements. In addition, agencies must verify auto-insurance and validity of driver’s license.
 - Utilization Guidelines: there are several new items to address provider requests and utilization of services.
 - HCBS Review: Kepro will review all licensed settings that have an approved Plan of

Compliance from BMS.

Action Items	Person Responsible	Deadline
NONE		

Agenda Item	Sub-committee Updates & Assignments	Presenter	Leah Redden
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Discussion and Conclusions:

- **Subcommittee 1 – Abuse/Neglect/Exploitation Training**
 - The recommended Abuse/Neglect/Exploitation Training has been completed and been sent to providers.
- **Subcommittee 2 – Data Analysis Set**
 - The committee will determine how to proceed once more information is made available by BMS.
- **Subcommittee 3 – Direct Care Ethics Trainings**
 - The recommended Direct Care Ethics Training has been completed and sent to providers.
- **Subcommittee 4 – Member Rights Training Development**
 - A subcommittee, including Angie Breeden as chair and Mary Lea Wilson was developed. This group will involve additional stakeholders as needed. A status update will be provided by Mary Lea Wilson at the next meeting.
- **Subcommittee 5 – Service Coordinator Conflict of Interest/Professional Ethics Training**
 - A subcommittee, including Susan Given as chair, Amber Hinkle, Mary Lea Wilson, and Kelly Miller was developed. A status update will be provided by Susan Given at the next meeting.
- **Subcommittee 6 – Development of the Annual Physical Form**
 - A subcommittee, including Marilyn Osborne as chair, Jeannie Elkins, and Chris Messenger was developed. A status update will be provided by Marilyn Osborne at the next meeting.
- **Subcommittee 7 – Categorization of Living Arrangements**
 - BMS requested that the council develop a sub-committee to recommend living arrangement categories. Determining whether a person is considered to live in an ISS or a natural family setting, in certain situations, is not clear. As such, parameters for each must be identified. For example, if a member lives with his/her spouse who does not receive services via the program, should this arrangement be identified as a natural family or an ISS?
 - A subcommittee, including Mary Lea Wilson, Richard Covert, Marilyn Nichols, and a member designated by Amber Hinkle, was developed.
 - Ms. Goebel will contact the sub-committee members to provide additional information and examples, and will facilitate a meeting. Recommended categories will be presented to BMS prior to the next meeting.
- **Subcommittee 8 – Membership**

- As the council currently has vacancies but no applications, the membership subcommittee will inform council of vacancies and will meet to discuss applicants once received.
- Leah Redden will revise Membership flier as agreed. Once revisions are made, the flier can be disseminated to providers and communities.

Action Items	Person Responsible	Deadline
Status update—Member Rights Training Development	Mary Lea Wilson	Next meeting
Status update—SC Conflict of Interest/ Professional Ethics Training Development	Susan Given	Next meeting
Status update—Revision/update of annual physical form	Marilyn Osborne	Next meeting
Present recommended living arrangement category identification to BMS	April Goebel	Next meeting

Agenda Item	Wrap-Up/Confirmation of Next Meeting		
Discussion and Conclusions:			
<ul style="list-style-type: none"> • Next meeting will be held April 12, 2017 from 10am -4pm at the Bureau of Senior Services (BoSS) office, 3rd Floor, Charleston Town Center Mall. • Adjourned 3:32pm 			
Minutes submitted by Sissy Johnson			