

Program Planning and Evaluation Committee

Meeting Highlights

July 11, 2017

EXTRAORDINARY BARRIERS LIST

Patricia Newman, *Mental Health Case Management Supervisor*, reported to the Committee that the census at state hospitals has been increasing steadily. In response, the state launched a census reduction effort called the Quota Project. Through this initiative, RACSB identified six (6) individuals to be discharged. Three (3) have been discharged, and three (3) remain hospitalized.

Elizabeth Wells, *Mental Health Adult Intensive Case Manager*, presented to the Committee the Extraordinary Barriers List (EBL) at State Psychiatric Hospitals. Individuals ready for discharge from state psychiatric hospitals are placed on the EBL when placement in the community is not possible due to barriers caused by waiting lists, resource deficits, or pending court dates.

Mrs. Newman reviewed the disposition of six (6) individuals on the EBL at Western State Hospital from our area for the month of June 2017.

EMERGENCY SERVICES ACTIVITY AND TDO EXCEPTION REPORT

Jacque Kobuchi, *Emergency Services Coordinator*, presented to the Committee the Emergency Services Activity and Temporary Detention Order (TDO) Exception Report for June 2017.

Mrs. Kobuchi reported that RACSB Emergency Services staff completed 428 emergency evaluations during June 2017. In addition, staff assisted with the execution of 75 Emergency Custody Orders (ECO) and 95 Temporary Detention Orders (TDO).

Mrs. Kobuchi reviewed six (6) cases where the primary state psychiatric hospital was used as the facility of last resort when a community facility was not found at the end of an eight (8) hour ECO period.

CIT ASSESSMENT CENTER REPORT

Jacque Kobuchi, *Emergency Services Coordinator*, presented to the Committee the Crisis Intervention Team Assessment Center Report for June 2017. She said 30 assessments were completed at the CIT Assessment Center during the month of June 2017 (Caroline County – 1; Fredericksburg – 13; King George County – 2; Spotsylvania County – 8; and Stafford County – 6).

Mrs. Kobuchi reported that a total of 773 individuals have been served at the CIT Assessment Center since the program started in September 2015.

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INDEPENDENT ASSESSMENT CERTIFICATION AND COORDINATION TEAM (IACCT)

Donna Andrus, *Child and Adolescent Support Services Supervisor*, reported to the Committee that RACSB began serving as the Independent Assessment Certification and Coordination Team's provider for the Community Policy and Management Teams of all five (5) localities. IACCT was mandated by the Department of Medical Assistance Services to ensure a comprehensive assessment occurs so that only the children and adolescents most in need are placed into a residential facility or group home.

LOCAL EARLY INTERVENTION SYSTEM MONITORING RESULTS

Alison Standring, *Part C Program Manager*, reported to the Committee the results of an annual chart review of Early Intervention programs. She reminded the Committee that this annual review is to determine compliance with Part C federal regulations.

ELECTRONIC HEALTH RECORD/MEANINGFUL USE UPDATE

Suzanne Poe, *Information Technology Coordinator*, provided the Committee with an update on Information Technology and Electronic Health Record activities since the last meeting. She reported the following: Merit-Based Incentive Payment System is replacing Meaningful Use; collaborative documentation training is being conducted for outpatient staff; Service Process Quality Management training was held June 7, 2017; weekly meetings continue on the new website; and the use of Polycom equipment has expanded to the jail and a new Locum Tenens physician.

DEVELOPMENTAL DISABILITY CASE MANAGEMENT SERVICES STATUS UPDATE

Jennifer Acors, *Support Services Coordinator*, provided to the Committee an update on Developmental Disability Case Management Services. On September 1, 2016. Community Services Boards became the single point of entry for waiver services for individuals with developmental disability. RACSB has contracted with three (3) private providers to provide Developmental Disability Case Management Services to 42 individuals in our region.

MYERS DRIVE QUARTERLY CENSUS REPORT

Stephen Curtis, *ID Residential Services Coordinator*, presented to the Committee a census report on Myers Drive Respite Home for April 1, 2017 through June 30, 2017. During that time, 36 individuals received respite through Myers Drive.

ROSS DRIVE, LUCAS STREET ICF RECERTIFICATION SURVEY

Stephen Curtis, *ID Residential Services Coordinator*, presented to the Committee the results of the Virginia Department of Health recertification surveys for the Ross Drive and Lucas Street Intermediate Care Facilities.

WAITING LIST

Jane Yaun, *Deputy Executive Director*, presented to the Committee a report of the individuals waiting for services in June 2017.

At the time of the May report, there were 14 individuals waiting for Outpatient Services and 39 individuals (ages 14 or older) waiting longer than 30-days for an intake appointment with an RACSB psychiatrist

For Mental Health Residential Services, there were seven individuals waiting for placement (needs list – 3; referral list – 3; acceptance list – 1). For Intellectual Disability Residential Services, there were 139 on the wait list (needs list – 133; referral list – 5; acceptance list – 1). For the Program for Assertive Community Treatment (PACT), there were 31 individuals waiting for placement (needs list – 19; referral list – 6; and acceptance list – 6).

A total of 42 individuals have been enrolled in PACT.

A motion by the Committee recommending the Board approve the June 2017 Waiting List Report as presented was unanimously approved.

QUALITY ASSURANCE DASHBOARD REPORT

Stephanie Terrell, *Quality Assurance Coordinator*, presented to the Committee that Quality Assurance completed 40 chart reviews during the month of May, in the areas of Mental Health and Substance Abuse Services. Of the 40 charts reviewed, 15 had noted concerns. There were 24 primary staff responsible for one or more of the 40 charts reviewed. Of the 24 staff members, 11 were identified to have charts with concerns.

QUALITY ASSURANCE DASHBOARD REPORT PROPOSAL

Executive Director Jane Yaun reported that the Quality Dashboard Report was implemented in January 2016 to review assessments, service plans, progress notes, and quarterly reports to ensure documentation meets the needs of individuals served and was consistent with regulations, accreditation standards and payer requirements.

The Committee unanimously passed a resolution recommending that the Board approve the proposal as presented.

VACSB CONFERENCE

Executive Director Jane Yaun reminded the Committee that the Virginia Association of Community Services Board will hold a conference in October and asked Board members to let her know if they are interested in attending.