

RAPPAHANNOCK AREA COMMUNITY SERVICES BOARD
PROGRAM PLANNING & EVALUATION COMMITTEE

Tuesday, November 14, 2017, 10:30 a.m.

Ronald W. Branscome Building

Board Room 208, 600 Jackson Street, Fredericksburg, VA

PRESENT

ABSENT

Al Collins
Debbie Draper
Kheia Hilton
Karen Kallay
Ken Lapin
Tina Sears
Greg Sokolowski
Linda Ball
Jack Rowley

Ellen Sears

OTHERS PRESENT

Jane Yaun, *Executive Director*
Rhonda Pellicano, *Finance and Administration Director*
Joe Wickens, *Community Support Services Director*
Sharon Killian, *Clinical Services Coordinator*
Andrea Merwin, *Administrative Associate*
Suzanne Poe, *Information Technology Coordinator*
Jacque Kobuchi, *Emergency Services Coordinator*
Kari Norris, *Crisis Intervention Team Program Manager*
Stephanie Terrell, *Quality Assurance Coordinator*
Patricia Newman, *Mental Health Case Management Supervisor*
Amy Umble, *Public Information Officer*
Elizabeth Wells, *Mental Health Adult Intensive Case Manager*
Jennifer Acors, *Support Services Supervisor*
Nicole Baucum, *Administrative Office Associate*
Brandie Williams, *Director of Operations*
Donna Andrus, *Child and Adolescent Support Services Supervisor*

ISSUE:

EXTRAORDINARY BARRIERS LIST

DISCUSSION:

Elizabeth Wells 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. Wells reviewed the disposition of four (4) individuals on the EBL at Western State Hospital from our area as of November 2, 2017.

Kheia Hilton remarked that RACSB has “done an amazing job keeping this EBL down.”

ATTACHMENT I

ACTION TAKEN: No action necessary. Mrs. Newman and Mrs. Wells departed the meeting.

ISSUE: EMERGENCY SERVICES AND TDO EXCEPTION REPORT

DISCUSSION: Jacque Kobuchi presented to the Committee the Emergency Services and TDO Exception Report. She reported that RACSB Emergency Services staff completed 453 emergency evaluations and helped execute 109 Emergency Custody Orders (ECO) and 113 Temporary Detention Orders (TDO) during October 2017. In fourteen (14) cases, the primary state psychiatric hospital (Western State Hospital-10 and Commonwealth Center-4) was used as the facility of last resort when a community facility was not found at the end of an 8-hour Emergency Custody Order (ECO) period.

ATTACHMENT II

ACTION TAKEN: No action necessary.

ISSUE: CIT ASSESSMENT CENTER REPORT

DISCUSSION: Kari Norris presented to the Committee the Crisis Intervention Team Assessment Center Report for October 2017. She said the CIT Assessment Center assessed 40 individuals in the month of October 2017. The number of persons served by locality were the following: Fredericksburg 16; Caroline 1; King George 3; Spotsylvania 8; and Stafford 12.

She also reported that the Crisis Intervention Team held its fourth quarterly 40-hour CIT training on October 30 through November 3, 2017. The localities and disciplines included: Spotsylvania County, Stafford County, Caroline County, Virginia State Police, Rappahannock Regional Jail, NGA police, Fredericksburg City Police, District 21 probation, and a peer specialist. The total number of individuals trained was 18.

ATTACHMENT III

ACTION TAKEN: No action necessary. Ms. Norris and Mrs. Kobuchi departed the meeting.

ISSUE: INDEPENDENT ASSESSMENT CERTIFICATION AND COORDINATION TEAM UPDATE

DISCUSSION: Donna Andrus presented to the Committee an update on the Independent Assessment Certification and Coordination Team (IACCT). She reminded the Committee that as of July 1, 2017, RACSB began serving as the IACCT provider for the Community Policy and Management Teams of all five (5) localities. IACCT was mandated by the Department of Mental Assistance Services to ensure a comprehensive assessment occurs so that only those children and adolescents most in need are placed out of home and community and into a residential facility or group home.

ATTACHMENT IV

ACTION TAKEN: No action necessary. Mrs. Andrus departed the meeting.

ISSUE: INFORMATION TECHNOLOGY/ELECTRONIC HEALTH RECORD UPDATE

DISCUSSION: Suzanne Poe provided the Committee with an update on Information Technology and Electronic Health Record activities since the last meeting. She reported the following: Health Quality Innovators assessed the physical security risk of outpatient facilities; the new treatment plan went live on November 12; weekly meetings continue on the kiosk system; the PACT program is interested in expanding use of Netsmart Clinician; two secure texting programs are being tested; a Chromebook has been received to test the Board Portal; work continues on managed services contracts; and weekly meetings continue on the integration of electronic health records and the Waiver Management System.

ATTACHMENT V

ACTION TAKEN: No action necessary. Mrs. Poe departed the meeting.

ISSUE: MYERS DRIVE QUARTERLY REPORT

DISCUSSION: Stephen Curtis provided the Committee with an update on use of Myers Drive Respite Home. He reported that 35 different individuals were provided respite supports at Myers Drive Respite Home during the period of July 1, 2017 through October 31st, 2017. Of these 35, six individuals had not previously attended the program. The total hours billed for those 35 individuals' services during this timeframe yielded 3,899.45 hours. Of these 3,899.45 hours, 2,561.45 hours were billed to Medicaid and 1,338 hours were billed to the individual or their family at the private pay rate of \$25.00 a day. The revenue billed to Medicaid was \$40,603.25; the revenue generated from families paying the private pay rate was \$1,750 for this timeframe. The revenue total for the time period was \$42,353.25.

ATTACHMENT VI

ACTION TAKEN: No action necessary. Mr. Curtis departed the meeting.

ISSUE: DEVELOPMENTAL DISABILITY CASE MANAGEMENT SERVICES STATUS UPDATE

DISCUSSION: Jennifer Acors 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.

ATTACHMENT VII

ACTION TAKEN: It was moved by Ken Lapin and seconded by Al Collins that the Committee recommends the Board stop receiving regular updates on Developmental Disability Case Management. The motion was unanimously passed. Mrs. Acors departed the meeting.

ISSUE: WAITING LIST

DISCUSSION: Stephanie Terrell presented to the Committee a report of the individuals waiting for services in October 2017.

As of October 30, 2017 there are 103 individuals on the wait list for outpatient therapy services. and 49 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 (7) individuals waiting for placement (needs list – 1; referral list – 6; acceptance list – 0). For Intellectual Disability Residential Services, there were 137 on the wait list (needs list – 135; referral list – 1; acceptance list – 1). For the Program for Assertive Community Treatment (PACT), there were 20 individuals waiting for placement (needs list – 98; referral list – 4; and acceptance list – 7).

A total of 49 individuals have been enrolled in PACT.

ATTACHMENT VIII

ACTION TAKEN: It was moved by Al Collins and seconded by Karen Kallay that the Committee recommends the Board approve the Waiting List as presented by staff. The motion was unanimously approved.

ISSUE: QUALITY ASSURANCE REPORT

DISCUSSION: Stephanie Terrell reported to the Committee that Quality Assurance staff performed site inspections and chart reviews for the following three (3)

Rappahannock Area Community Services Board (RACSB) programs:

Emergency Services (63 charts)
Crisis Stabilization (10 charts)
Supervised Apartment Program (10 charts)

Of the 83 charts reviewed, 14 of the charts had noted concerns. There were 14 primary staff responsible for one or more of the 83 charts reviewed.

ATTACHMENT IX

ACTION TAKEN: No action necessary.

ISSUE: DMAS QUALITY MANAGEMENT REVIEW

DISCUSSION: Stephanie Terrell presented to the Committee a report of a review by the Department of Medical Assistance Services. She told the Committee that in August, Myers and Stauffer LLC., began a Medicaid billing review for Developmental Disabilities (DD) Day Support services. The review was completed on August 11, 2017. The sample included 12 recipients who received services DD Day Support Services during the period of October 1, 2015 through August 31, 2016. The audit noted the following discrepancy: Four (4) units billed and paid for without the supporting documentation. The noted discrepancy resulted in a final overpayment amount of \$174.92.

ATTACHMENT X

ACTION TAKEN: It was moved by Karen Kallay and seconded by Al Collins that the Committee recommends the Board approve the management review as presented. The motion was unanimously passed.

ISSUE: FY 2018 ACCESSIBILITY PLAN

DISCUSSION: Stephanie Terrell presented to the Committee an Accessibility Plan. She told the Committee that, in accordance with CARF standards, RACSB maintains an accessible, healthy and safe environment for persons served and personnel. The plan, in its entirety, addresses nine barriers: 1) attitudinal barriers; 2) architectural barriers; 3) environmental barriers; 4) financial barriers; 5) employment barriers; 6) communication barriers; 7) transportation barriers; and 8) barriers in community integration; and 9) technology barriers. Barriers currently identified, actions taken to address those barriers, or a timeline to remove those barriers are addressed in each section.

ATTACHMENT XI

ACTION TAKEN: It was moved by Karen Kallay and seconded by Greg Sokolowski that the Committee recommends the Board approve the accessibility plan as

presented. The motion was unanimously passed. Jack Rowley entered the meeting during this agenda item.

ISSUE: FY 2018 RISK MANAGEMENT PLAN

DISCUSSION: Stephanie Terrell presented to the Committee the FY 2018 Risk Management Plan. She told the Committee that the purpose of the Risk Management Plan (RMP) is to support the mission and vision of Rappahannock Area Community Services Board (RACSB) as it pertains to clinical risk and safety of individuals served, employees, and visitors. The approval of this plan is a requirement for CARF accreditation.

ATTACHMENT XII

ACTION TAKEN: It was moved by Ken Lapin and seconded by Greg Sokolowski that the Committee recommends the Board approve the risk management plan as presented. The motion was unanimously passed.

ISSUE: FY 2018 FIRST QUARTER INCIDENT REPORT REVIEW

DISCUSSION: Stephanie Terrell presented to the Committee the FY 2018 First Quarter Incident Report Review. She told the Committee that incident reports are reviewed to evaluate and identify instances in which the agency can reduce the likelihood of or mitigate the impact of future incidents.

Five hundred and ten Incident Reports were completed from July 1, 2017 through September 30, 2017. This is a decrease of 93 incident reports compared to the first quarter of FY.

ATTACHMENT XIII

ACTION TAKEN: It was moved by Al Collins and seconded by Karen Kallay that the Committee recommends the Board approve the incident report review as presented. The motion was unanimously passed.

ISSUE: FY 2018 FIRST QUARTER SUICIDE ATTEMPTS SUMMARY

DISCUSSION: Sharon Killian presented to the Committee a summary of reported suicide attempts for the first quarter of FY 2018. She told the Committee that 18 adults attempted suicide; no children or adolescents experienced serious incidents in this timeframe. In addition, one (1) female died of an overdose of Heroin and Fentanyl, which was an unintentional overdose.

ATTACHMENT XIV

ACTION TAKEN: No action necessary

ISSUE: BOARD RETREAT

DISCUSSION: Jane Yaun reminded the Committee that the Board Retreat would take place the following weekend. She told them it would begin at 4 p.m. on November 17 and would finish by 4 p.m. on November 18.

ACTION TAKEN: No action necessary

There being no further business, the meeting of the Program Planning and Evaluation Committee adjourned at 12:07 p.m. The next meeting of the Program Planning and Evaluation Committee is scheduled for Tuesday, December 12, 2017 at 10:30 a.m. in Board Room 208 at 600 Jackson Street, Fredericksburg, Virginia.