

<b>Quality Improvement Committee (QIC) Meeting</b>	<b>4/28/2016</b>
	<b>11:00am-12:00pm</b>
	<b>Shasta Room, Health Dept.</b>

**Meeting called by:** Cesar Anaya, Quality Improvement Team

**Facilitator:** Cesar Anaya and Heather Freudenthaler, Quality Improvement Team

**Attendees:** Please refer to sign-in sheet for QI Committee Meeting

## *Minutes*

<b>Agenda item:</b>	Policy 490- Collaborative Case Conference (CCC) update	<b>Presenter:</b>	Heather Freudenthaler
<b>Discussion:</b>	<ul style="list-style-type: none"> <li>• Discussion on the changes made to the policy to include that clients and family members/support person may participate in a CCC.</li> <li>• Discussion about Advance Directives to identify who the client would authorize to participate in a CCC.</li> <li>• QI explained QI team will continue to remain as consultants regarding the legal, ethical, risk management aspects of a CCC even if not present at CCC.</li> <li>• Spoke about SUD teams and providers being able to request/participate in CCC.</li> <li>• Add in phone number in section that says: "Please provide 2-3 dates/times and names of participants to invite (please provide email addresses and phone number for non-county staff) in the Request for QI Consultation.</li> </ul>		
<b>Conclusion</b>	Policy approved		

<b>Agenda item:</b>	Policy 129 Medical Records Documentation	<b>Presenter:</b>	Cesar Anaya
<b>Discussion:</b>	<ul style="list-style-type: none"> <li>• Discussion regarding the treatment plan and progress notes having an electronic staff signature. This has been in place; however, was not written in the policy.</li> <li>• DSM-IV-TR is currently used with ICD10 diagnosis codes.</li> <li>• Electronic Medical Record was updated to Electronic Health Record.</li> <li>• Staff spoke about treatment plan being translated in client's preferred language, when possible.</li> <li>• Medical Necessity for the Diagnosis is established once per year per Monterey County policy.</li> <li>• Monterey County Health Department Confidentiality and Non-Disclosure Acknowledgment will be included with the policy.</li> </ul>		
<b>Conclusion</b>	Policy approved		

<b>Agenda item:</b>	Encrypted Emails	<b>Presenter:</b>	Molly Hubbard
<b>Discussion:</b>	<ul style="list-style-type: none"> <li>• Staff inquired about whether to include client name, initials, and/or medical record number in emails to other staff within Behavioral Health and to outside providers.</li> <li>• Privacy Officer explained and encouraged staff to have 'least identifiable' information should be in the email.</li> <li>• Privacy Officer clarified encrypted vs. non-encrypted emails.</li> </ul>		

<b>Conclusion</b>	Use 'least identifiable' information in emails	
✓ items tabled		
<b><i>Other Items</i></b>		
Next Meeting:	<b><i>May 26, 2016</i></b>	