

Quality Improvement Committee (QIC) Meeting	08/22/2013
	11:00 to 12:00
	Shasta Rm, Health Dept

Meeting called by: Amie Miller, QI Manager

Facilitator: Amie Miller

Attendees: Refer to sign-in sheet for QI Committee Meeting dated 08/22/2013. EQRO Review Team staff were also present as this meeting coincided with the Monterey County EQRO Review.

Minutes

Agenda item:	Post-Hospitalization Follow Up Data & Future Data Goals	Presenter:	Amie Miller, QI Manager
---------------------	---	-------------------	-------------------------

Discussion: During the last QIC meeting the post-hospitalization data was reviewed and it was decided that the team would like to see more data before setting a goal for providing post-hospitalization services. During today's meeting the original data from the IQ report was reviewed and discussed and then the group engaged in discussion regarding various ways to improve the percentage of post-hospitalization services being provided to clients and a goal was set related to improving the rate of post-hospitalization follow-ups.

- QIC discussed the follow up rates with regard to Natividad Medical Center as well as Medi-Cal Hospitalizations at Community Hospital of the Monterey Peninsula and in and out of county hospitalizations of Monterey County residents with Medi-Cal.
- We are striving toward a gold standard of clients receiving post-hospitalization follow up within 7 days (this is the nationally recognized standard). According to the IQ report, 46% received a follow up behavioral health visit in less than 7 days. 54% received a service in more than 7 days after discharge. 49% of inpatient hospital admissions did not receive any type of follow up services at all.
- QIC then discussed the "Deep Dive" form which provides in depth review of the post-hospitalization follow-up data (the data is taken from the last calendar year). Each table was reviewed in depth and questions arose with regard to what types of clients fall under the various categories (Self Pay, UMDAP, etc.). It was suggested that we should look into the possibility of adding a Dual Diagnosis category.
- QIC engaged in clarifying discussion regarding who exactly is designated as the person who follows up with clients post hospitalization. It was explained that when the client is in the Monterey system of care it is the Monterey provider's realm to provide follow up but for other clients being served there is no individual designated and often there is not follow-up.
- QIC discussed what resources are needed to improve the percentage of clients who receive follow-up services in a timely manner. Meeting attendees discussed GAP services and the fact that a GAP worker has recently been hired who can identify clients who are at risk. It was clarified that clients are automatically eligible for GAP if you do not receive post-hospitalization follow-up within 7 days. A bilingual individual from the community was hired for this position and will be starting to provide these services in the near future. The usefulness of utilizing family partners and peer partners/navigators was also discussed.
- An error was noted on the table on Page 2 of the "Deep Dive" document—the table mistakenly notes 0% re-hospitalization rate for the Depressive diagnosis type.
- QIC team discussed the possibility of receiving consents from clients so that we can follow up with primary health providers when possible to ensure that the client receives the necessary follow-up services.
- QIC team engaged in an in-depth discussion of potential goals for increasing the percentages of post-hospitalization follow-up services. With additional input from an attendee it was decided upon that there are two separate areas that are being measured—1. Making contact with the client post-hospitalization (i.e. such as Case Management telephone call) and 2. The client receiving services post-hospitalization.
- QI will monitor the post-hospitalization data closely within the lens of race, language, gender and MHSA ages.

Conclusions:	QIC decided upon a goal of 100% as it relates to any type of client contact post-hospitalization. A goal of 20% improvement over the next 6 months was agreed upon for engaging clients in <i>actual service</i> post-hospitalization. At the end of the meeting a copy of a portion of the D3 was provided to all attendees.	
Action items	Person responsible	Deadline
✓ QI will continue to track post-hospitalization follow-up data and will track progress toward the percentage goals identified above.	QI Team	ASAP
Next Meeting:	Thursday, September 26 th 11:00am-12:00pm	