

Quality Improvement Committee (QIC) Meeting		12/05/2013	
		11:00am-12:00pm	
		Shasta Room, Health Dept.	
Meeting called by: Amie Miller, QI Manager			
Facilitator: Amie Miller, Ben Bunyi			
Attendees: Please refer to sign-in sheet for QI Committee Meeting			
Minutes			
Agenda item:	Policy 322 – Protected Health Information Breach Notification and Mandatory Reporting	Presenter:	Ben Bunyi
Discussion:	<ul style="list-style-type: none"> Facilitators and attendees discussed the eventual breach of information and the discussed steps to be followed if/when a breach may occur and the development of an assessment tool if/when a breach may occur. Facilitators and attendees discussed how to communicate policy to 'staff' if/when a breach occurs and discussion regarding communicating to 'staff', should a breach occur 'staff will not be reprimanded' with the exceptions of negligence (i.e. laptop open or stolen). Facilitators also suggested presenting a brief review at an all staff meeting and adding policy/procedure to QI website. Facilitators and attendees discussed the possibility of receiving 'incoming breached' items, attendees instructed to notify entity of the breach. Facilitators and attendees agreed, direct any additional questions to QI staff. 		
Agenda item:	Policy 320 – Minor Consent	Presenter:	Ben Bunyi

Discussion:	<ul style="list-style-type: none"> • Facilitators and attendees discussed what constitutes an “emancipated” and “self-sufficient” minor and the documentation service providers should be requesting to support that a client is an emancipated or self-sufficient minor. • Facilitators and attendees discussed changes in laws that expanded the definition of sensitive services (i.e. therapy, case management, rehabilitative counseling) and how minors 12 or above can consent to these sensitive services without a parent. <ul style="list-style-type: none"> ○ Note: Minors, regardless of any age, cannot self-consent to psychotropic medication treatment as this service is not considered a sensitive service. • Facilitators and attendees discussed the intersection of policies 321 and 320. <ul style="list-style-type: none"> ○ Minors who are emancipated, self-sufficient, or are seeking sensitive services can consent to their own services. We will need minors who are emancipated, self-sufficient, or 12 and above to consent to disclosing confidential Behavioral Health information. And, even if the parent is the person seeking services for the minor 12 or over, the minor is involved in the consent for services and authorization to disclose confidential Behavioral Health information process. • Facilitators and attendees discussed the issue of foster children, minor consent, and authorization to disclose confidential Behavioral Health information. Court Order may fulfill all the requirements. <ul style="list-style-type: none"> ○ QI Staff will seek further clarification about this specific circumstance and develop a policy clarification. • Facilitators and attendees discussed how MOUs and contracts for services do not supersede the Federal and State laws relating to consent and confidentiality. • Facilitators and attendees discussed need to develop decision making grid. 	
Conclusions:	<ul style="list-style-type: none"> • Motion made and approved to accept polies with suggested changes. 	
Items Tabled	Person responsible	
✓ No items tabled		
<i>Other Items</i>		
Next Meeting:	January 23, 2013	