



Continuous Quality Improvement (CQI) Committee

January 17th, 2023 | 9:30 am – 11:00 am

BBHC- MS Teams

https://teams.microsoft.com/l/meetup-join/19%3ameeting_MWViNjk0MTAtNjc3Ny00ZmU1LThlYTMtZTBjMWE1N2Y2YmNm%40thread.v2/0?context=%7b%22Tid%22%3a%227bbca740-f271-4428-aeec-f0585b3625b3%22%2c%22Oid%22%3a%22c21a5b4a-8413-4e49-b3cd-1515692c3561%22%7d

AGENDA

1. Welcome & Introductions

- Name and agency in the chat box for attendance purposes.
- Motion to approve November Meeting Minutes.

2. Ice Breaker – Setting Successful Resolutions for 2023 -

<https://www.youtube.com/watch?v=gTQIYhbAQtU>

3. Presentations:

- **Dr. Caren Longworth (BBHC)** – Clinical Quality Improvement FY 22-23 Quarter 2 summary overview.
- **Provider Presentation on Services, Referral Process, Program Updates, and other information.**
 - Broward House – Jamie Powers, Daisha Vargas, and Jason Wynn (AMP Project)
 - Archways – Marie Fairchild
 - Banyan – Constance Armstrong
 - BARC – Jack Feinberg
 - Broward Housing Solutions - Lisa Vecchi
 - BSO - Sarah Gillespie Cummings and Josephine Acevedo-Massa
 - Broward County Elderly and Veterans Services Division – Tamika McBride
 - Broward Health – Michelle Krichbaum
 - Camelot – Michele Disorbo, Casi and Tom
 - Care Resource - Hugo Rocchia
 - Children’s Harbor – Ana Gall and Felicia Pittman

4. Provider Needs or Comments:

5. Reminders:

- IRAS Critical Incident Reporting Email: incidentreporting@bbhcflorida.org or call BBHC Incident Reporting Hotline: **954-312-0404**.
- Community Person Served Satisfaction Survey’s Third Quarter surveys are due by March 31st, 2023.
 - CPSSS Link:
https://floridadcf.iad1.qualtrics.com/jfe/form/SV_bmdzwmZQH1cMXSS

6. Next Meeting Agenda Suggestions: Provider presentations continued.

7. Announcements:

Next Meeting: Tuesday, February 21st, 2023, from 9:30 am -to 11:00 am.



Clinical/Continuous Quality Improvement (CQI) Committee

November 15th, 2022 | 9:30 am – 11:00 am

Virtual Meeting via Microsoft Teams

MINUTES

Attendance:

211	Janelle Kelley
Archways	Marie Fairchild, Melanie Fox
Banyan	Tohar Katz, Alexis Noel
Broward County Addictions Recovery Center	Vanessa Major
Broward County Elderly and Veterans Services Division	Tamika McBride
Broward County Sheriff's Office	Sarah Cummings, Josie Massa
Broward House	Daisha Vargas , Jason Wynn
Broward Health	Michelle Krichbaum, Neil Miransky
Broward Housing Solutions	
Broward partnership for the Homeless, Inc	Darline Jean, Jessica Maza, Elliana Dorvil
Camelot Community Care, Inc	Michelle Disorbo
Care Resource	Hugo Rocchia
Carisk	Shirley Murdock
Children's Harbor, Inc	
Citrus Health Network, Inc	Emma Munoz
Covenant House Florida, Inc	Nelson Bogren

DCF	Norma Wagner, Margaret DeCambre, Annika Cooke
Evolutions Treatment Center	
Fellowship House	Cristy Martinez, Miluse Campian
Fellowship RCO	
Foot Print to Success Clubhouse, Inc	Barbara Harmon
Ft. Lauderdale Hospital	
Gulf Coast Jewish Family & Community Services, Inc.	Tonyetta Fice
Harmony Development Center	Danile Jerome
Henderson Behavioral Health, Inc.	Ray Kelly
House of Hope, Inc.	Donnalina Deliazar
Kids In Distress, Inc.	Jevhky Mocombe
Memorial Healthcare System	
Mental Health America of Southeast Florida	Paul Jaquith, LeeAnne Bugter-vanLoon
NAMI Broward County, Inc.	
Our Children, Our Future, Inc.	
Silver Impact, Inc.	
Smith Mental Health Associates, LLC.	
South Florida Wellness Network, Inc.	
SunServe	

Taskforce Fore Ending Homelessness, Inc.	
The Chrysalis Center, Inc.	Andrea Rapoli
The Village South	
Tomorrow's Rainbow	Yanique Taylor
United Way of Broward County, Inc.	Rick Wolfer
Other	Kristina Jacob (Faces and Voices of Recovery), Mance Buttram (University of Arkansas), Lori Mellinger (Faces and Voices of Recovery), Alba Craig (Faces and Voices of Recovery)

BBHC Staff: Amelia Benson (Program/Contract Monitor), Caren Longworth (Quality Improvement Manager), Danica Mamby (Director of Administration), Jacinth Johnson (Data Contract Manager), Lucia Garcia (CQI Coordinator), Nylah Cunningham (Administrative Assistant), Stefania Pace (Executive Administrative Assistant), Takisha DuPree (Program/Contract Monitor), Tonya Smith (CQI Coordinator), Zakiya Drummond (Program/Contract Monitor)

Welcome & Introductions

Ms. Lucia Garcia called the meeting to order at 9:33 a.m. Attendance was taken electronically via Microsoft Teams.

Approval of Minutes from October 18, 2022, Meeting

Mr. Paul Jaquith motioned to approve the meeting minutes for the October 18th meeting. The motion was seconded by Ms. Donnalina Deliazar.

Ice Breaker – “Say Thank You” Video

Ms. Lucia Garcia shared a video entitled “*Say Thank You*” to promote gratitude and thankfulness during the upcoming holiday season.

Presentations:

Kristina Jacob (Faces and Voices of Recovery) – Provider Overview

- Ms. Kristina Jacob shared a presentation to discuss the mission, history, current status, and services offered at Faces and Voices of Recovery.
- Ms. Jacob advised providers that questions can be sent via email to nri@facesandvoicesofrecovery.org

Dr. Mance Buttram – Surveillance Update Presentation

- Dr. Mance Buttram shared a presentation to discuss the Broward County Treatment Admissions Data collected in 2021.

- Dr. Buttram presented an overview of the following data:
 - o Percent of treatment admissions by primary drug in Broward County (2009 – 2021)
 - o Treatment and drug of admission demographics
 - o Routes of administration
 - o Treatment admissions - Florida and Broward County, 2020 and 2021
 - o Route of administration – Florida and Broward County, 2021

Rafis Nin (MHA/FISP) – LOSS Team Overview

- Mr. Rafis Nin presented a brief overview of the Local Outreach to Suicide Survivors (LOSS) Team.
- Mr. Nin explained how the LOSS Team supports suicide survivors, the services offered, and LOSS Team contact information.
- Mr. Nin advised providers that the LOSS team can be contacted via email at loss@mhsefl.org or phone at (954) 384 – 0344 or (786) 682 – 0334.

Caren Longsworth – Monitoring Findings and Reminders, Peer Specialist Training Update, SAPT Assessment

- Dr. Caren Longsworth shared the following common findings from the monitoring’s completed during the 2022-23 fiscal year:
 - o Documentation and releases must be updated for persons served who have been in treatment for over one year.
 - o Performance measures are to be reviewed monthly, at a minimum.
 - o Service validation documentation should be reviewed for accuracy and applicable supporting documentation should be placed within the charts.
 - o I-9 and E-Verify forms must be completed according to federal guidelines. I-9 forms are to be completed before or on the day of employment. E-Verify forms are to be completed within three days of employment.
 - o Providers must show evidence of updated policies and procedures annually.
- Dr. Longsworth advised providers to share the Self-Assessment Planning Tool (SAPT) with all staff members to help plan on how to best deliver recovery-oriented services.
- Dr. Longsworth informed providers that there will be upcoming peer specific training for supervisors of peers.

Reminders

- IRAS Critical Incident Reporting email: incidentreporting@bbhcflorida.org or call BBHC Incident Reporting Hotline: (954) 312 – 0404
- Children’s Harbor Weekend Respite Program – provides services to youth 12 – 17 years old. The program flyer has been sent out along with the November 15th, 2022, meeting agenda.
- Ms. Lucia Garcia reminded providers that the Community Persons Served Satisfaction Surveys are due by December 31st, 2022. CPSSS Link: https://floridadcf.iad1.qualtrics.com/jfe/form/SV_bmdzwmZQH1cMXSS
- Ms. Garcia reminded providers that there will be no meeting in the month of December.

Next Meeting Agenda Suggestions

- During the CQI meetings held in January, February, and March, Providers will rotate and present their available services. This will include current services offered, waitlist length, and what the referral process looks like.

Announcements

- Ms. Lucia Garcia shared several positive comments received by persons served to show recognition to providers for all their work.

Next Meeting: Tuesday, January 17th, 2023



Continuous Quality Improvement 2nd Quarter Report – Fiscal Year 2022-2023

Report Date	January 10, 2023
Review Period	October 2022 to December 2022
BBHC CQI Staff	Caren Longworth, LCSW – Director of Quality Improvement Lucia Garcia, MS – Continuous Quality Improvement Coordinator Zakiya Drummond, MSW – Program/Contract Monitor Amelia Benson, MS – Program/Contract Monitor TaKisha DuPree, MS – Program/Contract Monitor
Report Reviewed & Approved by	Danica Mamby – Managing Director of Administration

Scope/Purpose:

The 2nd Quarter Continuous Quality Improvement (CQI) Report is a summary of all CQI activities and reporting in the Quarter being reported. During the 2nd Quarter of Fiscal Year (FY) 2022-2023, BBHC's CQI Department has conducted the following functions:

1. Processed electronic submission of Community Person Served Satisfaction Surveys for the 2nd Quarter
2. Investigated the Complaints & Grievances received by BBHC
3. Provided oversight of the Secret Shopper Initiative
4. Reviewed Performance Measures for accuracy
5. Managed the tracking and follow-up of Incident Reports
6. Conducted Contract Accountability Review Monitoring
7. Provided technical assistance to Network Providers
8. Disseminated the SAPT assessment to Network Providers
9. Provided IRAS training to Network Providers

Documents Reviewed:

During the preparation of this report, the following documents were reviewed:

1. Department of Children and Families (DCF) Community Person Served Satisfaction Surveys (CPSSS)
2. Cultural Competency and Diversity Plan for FY 2022-2023
3. ROSC Plan for FY 2022-2023
4. 2nd Quarter Complaint & Grievance Log
5. 2nd Quarter Secret Shopper calls reviewed
6. BBHC and Network Provider Performance Measures
7. 2nd Quarter Incident Reporting Report Tracking Log
8. Contract Monitoring Schedule
9. CAR Monitoring Reports

Summary:

DCF Consumer Person Served Satisfaction Surveys

During the 2nd Quarter of FY 2022-2023, BBHC received a total of 1297 surveys. Surveys are being collected on the DCF survey platform, which DCF disseminates to the Managing Entities. For the 2nd quarter of FY 2022-2023, the satisfaction rate for adult services was 86%, which is the same as the rate of overall satisfaction rate from last quarter. The satisfaction rate for children was 91%, which is 6% higher than the overall satisfaction rate from last quarter.

Table 1 (Adult Domains) below shows the overall satisfaction rates separated into the survey domains for adults. Table 2 (Child Domains) shows the overall satisfaction rates separated into the survey domains for children. Most respondents agreed or strongly agreed that the services they received were helpful. For adults who are receiving substance abuse and/or mental health services, social connectedness had the lowest satisfaction percentage. For children receiving mental health services, social connectedness had the lowest satisfaction percentage. For children receiving substance abuse services, functional satisfaction had the lowest satisfaction percentage.

Social connectedness and functional satisfaction for adults and children had the lowest rates reported last quarter. Network providers are encouraged to coordinate additional supportive services during and after treatment to enable persons served to increase social connectedness and improve functional satisfaction.

Table 1 – Adult Domains

Adult Mental Health: Total Surveys – 630 = 85%

General Satisfaction	Access to Care	Appropriateness/ Quality of Care	Outcome of Care	Involvement in Treatment	Social Connectedness	Functional Satisfaction
4.27	4.28	4.32	4.32	4.27	4.07	4.27
85.6%	85.6%	86.4%	86.4%	85.4%	81.4%	85.4%

Adult Substance Abuse: Total Surveys – 476 = 87%

General Satisfaction	Access to Care	Appropriateness/ Quality of Care	Outcome of Care	Involvement in Treatment	Social Connectedness	Functional Satisfaction
4.30	4.36	4.40	4.40	4.38	4.15	4.34
86%	87.2%	88%	88%	87.6%	83%	86.8%

Table 2 – Child Domains

Child Mental Health: Total Surveys – 149 = 94%

General Satisfaction	Access to Care	Appropriateness/ Quality of Care	Outcome of Care	Involvement in Treatment	Social Connectedness	Functional Satisfaction
4.71	4.72	4.85	4.66	4.72	4.53	4.61
94.2%	94.4%	97%	93.2%	94.4%	90.6%	92.2%

Child Substance Abuse: Total Surveys – 42 = 87%

General Satisfaction	Access to Care	Appropriateness/ Quality of Care	Outcome of Care	Involvement in Treatment	Social Connectedness	Functional Satisfaction
4.36	4.39	4.62	4.36	4.36	4.31	4.21
87.2%	87.8%	92.4%	87.2%	87%	86.2%	84.2%

Cultural Competency and Diversity Initiative

Broward Behavioral Health Coalition (BBHC) is committed to maintaining the value of cultural competency at the forefront of our daily interactions with children, youth, adults, and families, as well as with system partners and service providers. We are committed to action from all System of Care partners that is directed and focused.

BBHC collects data during OCP3 evaluations, which identified racial, ethnic, religious, spiritual, linguistic, sexual orientation, gender, gender identity, education, income, health beliefs and practices, discrimination, and historical barriers for persons served. Data collected is presented

During Contract Accountability Review monitoring, BBHC reviews Cultural Competency and Diversity Plans for network providers and ensures that the plans have been maintained. When facility tours are conducted, BBHC staff ensure that network providers have information printed or have access to information in English and other languages.

Complaints and Grievances

During the 2nd Quarter of FY 2022-2023, BBHC did not receive any formal complaints.

ROSC

ROSC is a value-driven framework to guide systems transformation. This involves a network of clinical and nonclinical services and supports that sustain long-term, community-based recovery, and structuring behavioral health systems. The network of services both formal and informal are developed and mobilized to sustain long-term recovery for individuals and families impacted by behavioral health disorders.

BBHC staff work closely with the DCF Recovery Oriented Quality Improvement (ROQI) Specialist and the DCF Statewide Recovery Integration Specialist) to improve recovery services offered in Circuit 17. During the 2nd Quarter, one network service provider was monitored for ROSC implementation by the ROQI. Care coordination and linkage to support services was an area identified as an opportunity for improvement.

BBHC network service providers completed the annual ROSC Self-Assessment Provider Tool (SAPT). The results were analyzed and will be presented at the January 2023 CQI meeting. Providers who had more than five staff complete the SAPT will be provided with an individualized report.

Secret Shopper Initiative

BBHC continues to manage the Secret Shopper Initiative, which was created to identify opportunities for system of care improvement. This initiative is focused on ensuring that front line staff, receptionists, and those who answer phone calls of individuals seeking services and information about services are knowledgeable about what services are available, provide a welcoming and encouraging environment, and do not discourage services based on ability to pay or other factors. Additionally, this initiative is to ensure the BBHC network providers have implemented a “No Wrong Door” policy. The No Wrong Door policy is the model for service delivery to persons served who have mental health or substance use disorders, or both, regardless of the point of entry to the behavioral health care system, as referenced in the Florida Statutes (FS 394.4573(1)(d)).

During the 2nd Quarter of FY 2022-2023, thirty-seven (37) network providers received secret shopper calls. Ninety-five percent (95%) of the calls made to network providers were productive and informative for the secret shopper. There was an increase in front desk staff providing their names,

as well an increase in linkage to alternative services if the provider did not provide the service requested.

Performance Outcomes Measures (POM) Activities

BBHC staff reviews all data submitted to the Provider Portal to identify potential coding and/or data errors, along with programmatic/clinical reviews. All network providers with performance outcome measures received a POM report during this quarter. Technical assistance was provided to network service providers when needed.

As of January 9, 2023, the BBHC network was attaining and/or surpassing all performance measures, for which data was calculated. There were three (3) children’s measures in which a score could not be calculated. BBHC staff will continue to work with network providers to determine why certain measures are not generating scores. Table 3 shows the most current BBHC Network performance measures:

Table 3 – Performance Measures

Measure	Description - BBHC Network 1.9.2023	Program	Program Type	Score	Target	Result
M0003	Average annual days worked for pay for adults with severe and persistent mental illness	Adult	Mental Health	58.69	40	pass
M0703	Percent of adults with serious mental illness who are competitively employed	Adult	Mental Health	60.00%	24.00%	pass
M0742	Percent of adults with severe and persistent mental illnesses who live in stable housing environment	Adult	Mental Health	92.00%	90.00%	pass
M0743	Percent of adults in forensic involvement who live in stable housing environment	Adult	Mental Health	90.00%	67.00%	pass
M0744	Percent of adults in mental health crisis who live in stable housing environment	Adult	Mental Health	94.00%	86.00%	pass
M0753	Percentage change in clients who are employed from admission to discharge	Adult	Substance Abuse	20.00%	10.00%	pass
M0754	Percent change in the number of adults arrested 30 days prior to admission versus 30 days prior to discharge	Adult	Substance Abuse	-92.00%	15.00%	pass
M0755	Percent of adults who successfully complete substance abuse treatment services	Adult	Substance Abuse	69.00%	51.00%	pass
M0756	Percent of adults with substance abuse who live in a stable housing environment at the time of discharge	Adult	Substance Abuse	94.00%	94.00%	pass
M0012	Percent of school days seriously emotionally disturbed (SED) children attended	Children	Mental Health	95.00%	86.00%	pass

M0377	Percent of children with emotional disturbances (ED) who improve their level of functioning	Children	Mental Health	N/A	64.00%	no data
M0378	Percent of children with serious emotional disturbances (SED) who improve their level of functioning	Children	Mental Health	N/A	65.00%	no data
M0778	Percent of children with emotional disturbance (ED) who live in a stable housing environment	Children	Mental Health	100.00%	95.00%	pass
M0779	Percent of children with serious emotional disturbance (SED) who live in a stable housing environment	Children	Mental Health	100.00%	93.00%	pass
M0780	Percent of children at risk of emotional disturbance (ED) who live in a stable housing environment	Children	Mental Health	N/A	96.00%	no data
M0725	Percent of children who successfully complete substance abuse treatment services	Children	Substance Abuse	67.00%	48.00%	pass
M0751	Percent change in the number of children arrested 30 days prior to admission versus 30 days prior to discharge	Children	Substance Abuse	0.00%	20.00%	pass
M0752	Percent of children with substance abuse who live in a stable housing environment at the time of discharge	Children	Substance Abuse	100.00%	93.00%	pass

Incident Reporting

BBHC's CQI staff meet weekly to review new and pending incident reports. The CQI Coordinator contacts providers to obtain information about incidents reported to the IRAS system. During the 2nd Quarter of FY 2022-2023, BBHC's CQI staff followed up on all incident reports and received detailed information from network Providers. There were eighty-eight (88) reported incidents during the 2nd Quarter. Table 4 provides the list and number of reported incidents.

There were forty-one (41) Elopements reported in this quarter. Of those 41 persons served who eloped, eleven (11) returned to treatment. There were two (2) missing children reported this quarter. Both of the children were found, and services were resumed when the persons served were located. Deaths (19) were the next highest category of incidents reported. A detailed report of deaths is included in the mortality section of this report.

A discussion about elopements and prevention implementation was held with the providers during the October CQI meeting. Providers discussed prevention efforts, and suggested program tours for persons served when they are stepping down to lower levels of care, and referrals to care coordination teams (CCT).

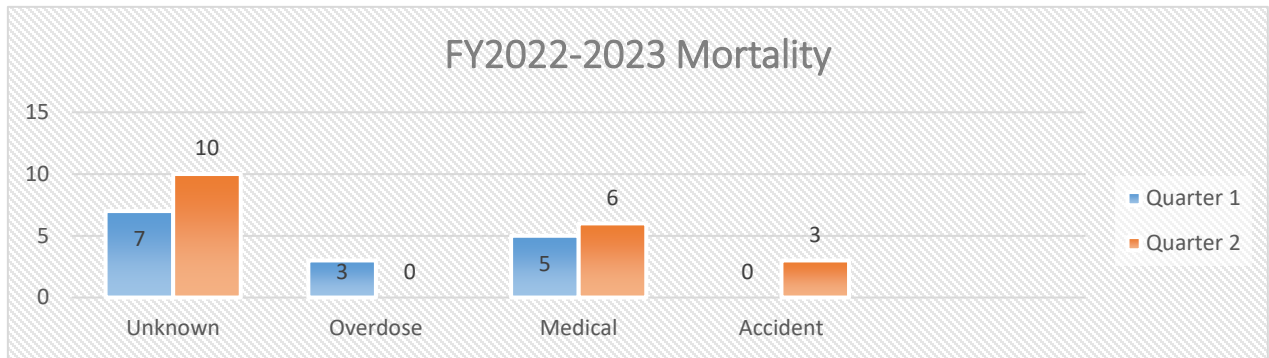
Table 4 – Incident Reports

Type	Quarter 1 Incidents Reported to IRAS	Quarter 2 Incidents Reported to IRAS
Baker Act	0	2
Child-on-Child Sexual Abuse	1	1
Child Abuse Hotline Call	0	2
Client Arrest	0	2
Death-Adult (Medical)	5	6
Death-Adult (Overdose)	1	0
Death-Adult (Undetermined)	9	10
Death-Adult (Accident)	0	3
Elopement	36	41
Employee Misconduct	1	2
Other (Contraband)	1	0
Other (Bomb Threat)	0	2
Other (Car Accident)	0	2
Other (Court Ordered Discharge)	1	0
Other (False Fire Alarm)	0	1
Other (Fraud)	1	0
Other (ER Medical Services)	2	0
Other (Medication Error)	1	0
Other (Missing Child)	0	2
Other (Left Treatment AMA)	1	0
Other (Physical aggression)	5	1
Other (Sexual Abuse)	1	0
Other (Staff Robbed)	0	1
Other (Verbal aggression)	1	2
Significant Injury to Clients	7	7
Significant Injury to Staff	1	0
Suicide	0	1
Grand Total	75	87

Mortality Review

During the 2nd Quarter of FY 2022-2023, there were nineteen (19) deaths reported by BBHC Network Providers, as illustrated in Table 5. Six (6) deaths were related to pre-existing medical conditions, and three (3) deaths were due to accidents (2 car accidents, 1 choking). The causes of ten (10) deaths were unknown at the time of this report. BBHC has requested reports from the reporting providers and the Medical Examiner’s Office. This report will be presented to the providers at the CQI meeting scheduled for January 17, 2023.

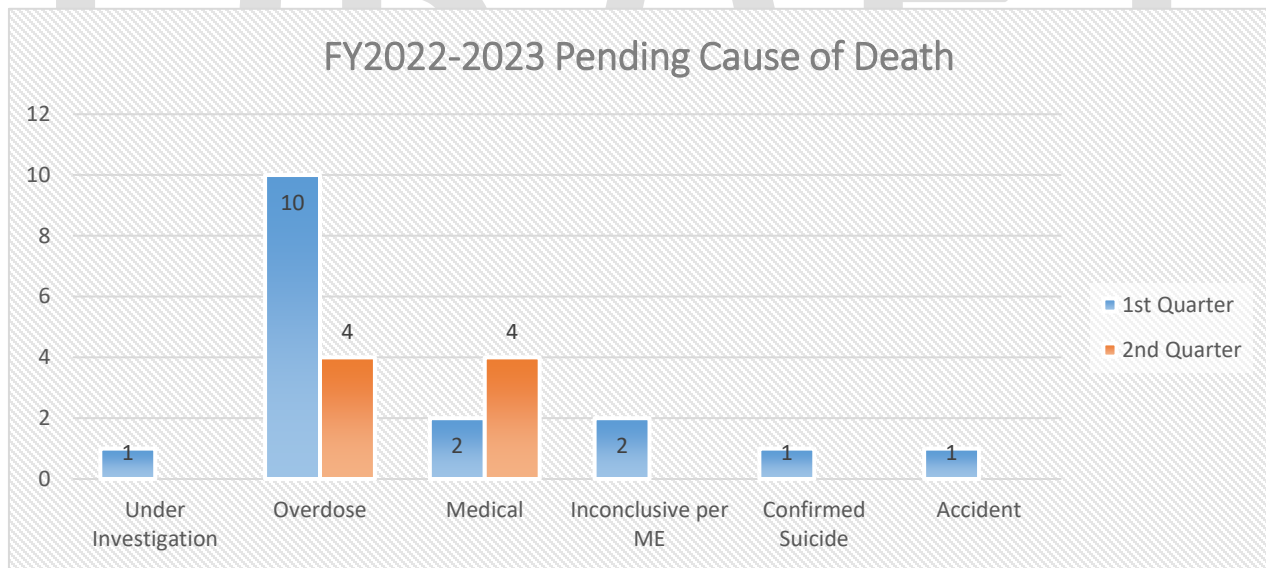
Table 5 – Mortality Reports



Mortality Review for Unknown Deaths reported during the 1st Quarter of FY 2022-2023

During the 1st Quarter of FY 2022-2023, there were nine (9) deaths reported in which the cause of death was unknown. BBHC staff contacted the providers as well as the Medical Examiner’s office and was able to obtain information as to the cause of death for all of the persons served. The cause of death for four of the persons served was drug overdose. The cause of death for four other persons served was pre-existing medical conditions. One person served was from Palm Beach and funded by the Palm Beach managing entity and mistakenly reported to BBHC. Table 6 shows the causes of the death for the eight persons served.

Table 6 – FY 2022-2023 Mortality Review for Unknown Deaths reported during Q1



Contract Monitoring

Contract Monitoring is a tool utilized to ensure contract compliance on an annual and an as needed basis in accordance with the established procedures and standards for all programs and services within the BBHC Provider Network. Reviews are conducted at least annually to ensure Providers are adhering to uniform procedures, delivering services in accordance with applicable federal and state laws, rules, and regulations; pursuant to the terms and conditions of the Provider’s contract with BBHC; and are following the policies and procedures established by BBHC and DCF.

During the 2nd Quarter of FY 2022-2023, four (4) virtual on-site monitoring was completed. Common finding from the CAR monitoring were related to documentation errors which affected service validation, invoice errors, failing performance outcome measures, lack of staff training, and errors with human resources documentation.

CQI-related Technical Assistance, Training & Other Quality Activities

BBHC CQI staff provides technical assistance and training to the provider network and BBHC staff. During the October CQI Committee meeting, an overview of the Outpatient MAT Program offered at Broward Health Medical Center was presented by Broward Health staff. The presentation provided information regarding who the program serves, and the Medication Assisted Treatment (MAT) services provided.

During the November CQI Committee meeting, an overview of the Local Outreach to Suicide Survivors (LOSS) Team was presented. Attendees were educated about how the LOSS Team supports suicide survivors, the services offered, and LOSS Team contact information. Another presentation was given by Faces and Voices of Recovery which identified the mission, history, and services offered at Faces and Voices of Recovery. In December, BBHC did not facilitate a CQI Committee meeting.

Prepared By:	Caren Longworth, DSW, LCSW
Title:	Director of Quality Improvement
Final Date:	1/10/2023

DRAFT