

SUSQUEHANNA COMMUNITY HEALTH AND DENTAL CLINIC, INC.
QA/QI Committee Meeting Minutes
December 10, 2020 12:00 PM

PRESENT VIA ZOOM: Emily Drick, QA/QI Manager; Dr. Kayla Richardson, Chief Medical Officer; Jackie Oliva Strus, HR Manager/Grants Manager; Max Houseknecht, Jr., CFO; Mindy Diggan, Dental Operations Manager; and Jim Yoxtheimer, President & CEO (ex-officio)

Excused: Angie Houseknecht; Karla Sexton; Dr. John Boll; and Barb Wool

I Policies for Review

The only policy for review this month was the 2021 QM Plan with all attachments. Dr. Richardson summarized the changes made to the plan itself, indicating only minor verbiage change. The word “dental” was replaced with “oral health”. Dental Director was removed and replaced with Dental Operations Manager. The attachments were updated to reflect the 2021 work plan.

Emily clarified how goals were placed for performance measures. These goals were discussed at the Workgroup meeting, comparing goals from last year, the new goals were set. The group decided to focus on measures that are being done in house.

Motion #1 Jim Yoxtheimer made the motion to recommend approval of the 2021 QM Plan with Attachments. Max Houseknecht, Jr. seconded the motion. The motion passed unanimously.

II FTCA

Nothing to report.

III PCMH

Nothing to report.

IV Credentialing/Recredentialing

a. Re-Credentialing

- Sonya Miles, CRNP

b. Credentialing

- Allyson Rothrock, PA-C
- Brian Webster, CRNP

Based upon Dr. Kayla Richardson’s review of the applications for reappointment and initial appointment to the River Valley Health and Dental Center medical staff and the results of the credentialing verification process, she has recommended that they be granted appointment to the medical staff. Their requests for medical practice privileges were also reviewed and found suitable for the granting of the privileges requested.

Motion #2 Max Houseknecht, Jr. made the motion to recommend approval of the recredentialing and reprivileging of Sonya Miles, CRNP and the credentialing and privileging of Allyson Rothrock, PA-C and Brian Webster, CRNP to the medical staff of River Valley Health and Dental Center. Emily Drick seconded the motion. The motion passed unanimously.

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V Dental QA/QI Reports

- a. Peer Review:** Mindy reported that no charts were reviewed for the month.
- b. Patient Satisfaction:** Mindy reported there were no patient complaints, however there was one patient dismissal.

VI Medical/Reproductive Health/Behavioral Health QA/QI Reports

- a. Peer Review:** Dr. Richardson reported the first official peer chart audit has been completed. She has seen an improvement on how the providers are reviewing their peers. There were two providers who stood out with low documentation scores. Dr. Richardson indicated she will try to remediate the documentation. The rest of the evaluations were overall good. The Problem Lists and History's were completed and up to date.

Dr. Richardson indicated that Emily has been working with Heather McCormick to receive Title X requirements for chart reviews. It is hoped by Quarter 2 of 2021 the Center will have functional rubrics for Reproductive Health reviews as well as Express Care reviews.

Emily reported on Chiropractic chart reviews. There were 3 patient charts reviewed with 3 consecutive visits for each patient. From those reviews there were the following fallouts:

- 1 chart had no informed consent
- 1 chart did not have documentation that HIPAA notice was provided
- 1 chart had no mechanism of injury/pain.
- 1 chart had no quality/character of pain
- 1 had no onset/duration/frequency/location of pain noted
- 1 had no aggravating/relieving factors noted
- 2 charts where outcome assessment protocol #182 was not followed. (a chiro documentation tool that measures functionality as treatment continues)
- 2 charts that had no treatment plan
- 1 chart with no change in treatment plan following initial and subsequent treatments
- 1 chart where required Medicare documentation was not used (PART...Pain, Asymmetry, Rom, Tissue tone)

Medical record numbers were not provided from Chiropractic Services, Corp who does their own chart reviews. Barb had told Emily that she was working with the chiropractor with templates to improve charting and lessen fallouts.

- b. Patient Satisfaction:** Dr. Richardson indicated there were no patient complaints.

VII Patient Satisfaction Survey

Emily reported that Workgroup has reviewed the results from the 2020 Patient Satisfaction Survey and has set new goals for 2021. The results for 2020 were overall positive showing high scores with clinical staff and provider care. Workgroup has decided to add questions on the survey regarding pharmacy hours. It was decided to email/text patients a link to complete the survey after their appointments in lieu of asking them to complete the form while in the office.

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Patients are currently not sure that they want to complete the surveys in house due to COVID-19 precautions. Jim stated he is very happy with the survey results; it shows that all employees work very hard.

VIII Performance Measures

Emily reported the performance measures look very similar to last month. Of note is the colorectal cancer screening has the highest score she has seen, and the diabetes measure has the lowest (which is the only measure that should be low). Since the rooming staff are completing the A1C's when the diabetic patients are in the Center for an appointment, most fallouts are due to the patient's A1C not being in control. The blood pressure control is not as good would be liked. The problem with that is telephonic visits automatically fallout as there are no blood pressure readings available. It was discussed that there are bags to be given to patients which include scales, blood pressure monitors, and thermometers. Emily will comprise a list and have the delivery driver start to deliver the bags to patients.

IX Risk Management

- a. Legal:** Nothing to report.
- b. Incident Reports:** No incidents to report.

X Care Coordination Team

Emily reported there were currently 91 patients on the Care Team. H3C has 145 patients. ED visits were 242 for the month. Of the 242 visits, 105 were possible emergent, 36 non-emergent, and 101 emergent.

Emily reported there was a Zoom meeting scheduled with UPMC to discuss the ED usage, but there was no response from UPMC.

XI EHR Update

Max reported there was an update with the eCW software. Retraining has been rescheduled to January. Max reported work continues on the CDSS scheduled for December 23 to build that information to incorporate quality measures in the EHR.

XII Special Projects

a. Behavioral Health/Dental Integration: Mindy reported the integration process continues to do well. There were 21 patients who tested positive and received services through Sue King or Makenzie Bush. There were 21 patients who tested positive but declined any services. There were no negative screens who requested services.

b. Customer Care Roundtable: Dr. Richardson indicated there has not been any further Customer Care Roundtable discussions at this time. There are a couple charts ready, but this project is on a hold at the moment due to staff involved not working on-site, being short-staffed, etc.

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c. Collaboration with Community Acupuncture: Jim reported that the Center, just last week, sent Dr. Reidy an addendum to his agreement to take into consideration the no-show patients. Jim asked if the Center has enhanced preparation here in the office to help mitigate the no-shows to Dr. Reidy. It was indicated that the Office Assistants at check out to help patients with the paperwork required. Dr. Richardson reported that she has asked providers to reiterate the importance of this specialty visit.

d. Hypertension Collaboration with Quality Insights: Emily reported she had a call with Quality Insights last week to set the goals for the program. They are working on 4-5 measures but focusing on hypertension. Resources were sent to the Center to help with interventions.

e. Peer Chart Audits: Dr. Richardson indicated she this item under Medical/Reproductive Health/Behavioral Health QA/QI Report as above.

XIII Open Discussion

Jim asked for clarification of a check received from Geisinger Medical Center. Emily reported this was for chart reviews that Barb did in her absence. It was for confirming diagnoses for patients with chronic disease. Other insurance companies do this, however, Geisinger is our highest payor.

Next Meeting Date: January 14, 2021 12:00 PM Community Room or Zoom