

SUSQUEHANNA COMMUNITY HEALTH AND DENTAL CLINIC, INC.
QA/QI Committee Meeting Minutes
October 12, 2020 12:00 Noon

PRESENT: Mindy Diggan, Dental Operations Manager; Jim Yoxtheimer, President & CEO; Emily Drick, QA/QI Manager; Dr. Kayla Richardson, Medical Director; Max Houseknecht, Jr., CFO; Angie Houseknecht, Front Office Manager; and Barb Wool, Clinical Operations Manager

PRESENT VIA ZOOM: Dr. John Boll, Board Chair

Excused: Jackie Oliva Strus

I Policies for Review

Dr. Richardson reviewed the clinical policies which were reviewed, and no revisions were recommended. Those policies are numbered 10.0.21, 10.0.25, 10.0.26, 10.0.27, 10.0.28, 10.0.29, and 10.0.30

Dr. Richardson reported policies which were reviewed and deferred to November's meeting as further review is needed before recommendations can be made to include policies numbered 10.0.24 and 10.0.31.

Dr. Richardson discussed the clinical policies which were reviewed with changes recommended which include policies numbered 10.0.17, 10.0.18, 10.0.19, 10.0.20, 10.0.22, and 10.0.23. The committee was afforded the opportunity for discussion and questions.

Motion #1 Max Houseknecht, Jr. made the motion to recommend approval of changes to policies 10.0.17, 10.0.18, 10.0.19, 10.0.20, 10.0.22, and 10.0.23. Karla Sexton seconded the motion. The motion passed unanimously.

Dr. Richardson and Karla discussed policy 6.0.04 (Patient Rights and Responsibilities) from the Patient Confidentiality section of the policy manual. This policy needed updated in response to the Failed Appointment policy changes.

Motion #2 Emily Drick made the motion to recommend approval of changes to policy 6.0.04. Angie Houseknecht seconded the motion. The motion passed unanimously.

Policy 12.0.06 Patient Failed Appointment policy was brought back to the committee with the requested revisions from last month's meeting. Suggestions for verbiage change were brought to the committee as well as clarification to show that failed appointments are department specific. For example, if a patient misses an appointment in dental, it does not count towards medical and RHS failed appointments. After discussion the following motion was made.

Motion #3 Max Houseknecht, Jr made the motion to approve policy # 12.0.06 Patient Failed Appointment Policy with the recommended clarifications. Karla Sexton seconded the motion. The motion passed unanimously.

SUSQUEHANNA COMMUNITY HEALTH AND DENTAL CLINIC, INC.
QA/QI Committee Meeting Minutes
October 12, 2020 12:00 Noon

II FTCA

Karla reported the FTCA site visit protocol will be changing its process to a process similar to the current OSV process. It was felt, for future reference, management should review these protocols to ensure compliance.

III PCMH

Nothing to report.

IV Credentialing/Re-Credentialing

Nothing to report.

V Dental QA/QI Reports

Mindy reported there were 8 charts reviewed for the month with 1 fallout. A hygienist failed to update blood pressure screening. The hygienist was counseled with this fallout. It has since been decided that blood pressures will be checked on all visits which require local anesthetic. This should negate future fallouts for this measure.

Mindy reported there were no patient complaints.

VI Medical/Reproductive/Behavioral Health QA/QI Reports

Dr. Richardson reported the review tool for Reproductive Health is the same tool used for Medical. The problem is that a lot of things are not applicable for RH services. The plan is for WorkGroup to review this tool at their next meeting to better fit RH and walk-in services.

Dr. Richardson indicated she has had meetings with each individual provider to review results from the last review as well as their performance for the reviews they did on other providers. She indicated she is working on a better process to get the reports back to the committee in a timelier fashion.

Barb reported there were four patient complaints which were all provider/patient relationship related. Each provider involved is aware and were counseled on the nature of the complaint.

VII Patient Satisfaction Survey

Emily reported there were 11 new surveys completed for the month. Most of the responses were positive. For the survey question of "I know how to receive care after hours" only 76% of patients answered yes which is concerning as the goal is 96%. Emily reported if the patient supplies their name on the survey a flyer is sent to their home address which informs the patient of how to receive advice/care after hours.

Emily reported that WorkGroup will review the survey and making recommendations for 2021.

VIII Performance Measures

Emily reviewed the performance measures and indicated that the numbers were very similar to last month. Emily reported she has a kickoff call scheduled with PACHC regarding the HTN collaborative.

SUSQUEHANNA COMMUNITY HEALTH AND DENTAL CLINIC, INC.
QA/QI Committee Meeting Minutes
October 12, 2020 12:00 Noon

Emily indicated WorkGroup will discuss which measures will be focused on for 2021 and will report back to this committee.

IX Risk Management

a. Legal: Nothing to report.

b. Incident Reports: Emily reported there was one incident report for the month. A patient was given an incorrect dose of Hepatitis B injection. The patient was informed and returned to the clinic for the correct dose. The employee who gave the first injection was re-educated on the process. Dr. Richardson and Barb reviewed orders in eCW and made some changes to avoid this error in the future. The patient suffered no adverse reaction to the incorrect dosage given.

X Care Coordination Team

Emily reported the Care Team is currently serving 86 patients. She was happy to report that 4 patients no longer need Care Team Coordination as they met their A1C goal due to their participation with the most recent diabetes nutrition program.

Emily reported ER visits were 226 which is up from 201 last month.

Barb indicated she had reached out to UPMC representative regarding the monthly ER meetings in attempt to combine with the Care Team. It is hoped to reconstruct the agenda to make the meetings more meaningful for everyone involved. She has reached out to UPMC twice and has not responded to the emails. Dr. Boll offered to facilitate in reaching out to the individual. Barb and Jim are amenable for Dr. Boll's help.

XI EHR Update

Max reported that eCW is having their annual user conference virtually this year and is free for everyone. Management has been taking advantage and has joined sessions. Max also indicated management will be setting up training on reporting to help build more robust reports. Emily has completed additional training surrounding the population health software within eCW. She is planning to review with Dr. Richardson.

XII Special Projects

a. Behavioral Health/Dental Integration: Mindy reported the Behavioral Health/Dental Integration began early this month with only a couple of the hygienist and Dr. Dan Bozza. To date, there have only been a couple with positive screens and take advantage of the program. It is felt that once patients come back for recall appointments, they may feel more comfortable with their dental team asking those types of questions. Mindy indicated training was scheduled with the hygienist and assistants this week to help with scripting and how to acknowledge the patient and move on with the dental appointment.

b. Customer Care Roundtable: Dr. Richardson indicated the first meeting of the Customer Care Roundtable was had. Some of the employees who were unable to attend were key players in the process. She reported there is another patient chosen for the next Customer Care Roundtable discussion. It will be reiterated to employees that participation is key in

SUSQUEHANNA COMMUNITY HEALTH AND DENTAL CLINIC, INC.
QA/QI Committee Meeting Minutes
October 12, 2020 12:00 Noon

improving the patient experience. Barb and Dr. Richardson thought they may revamp the process making it more interactive for all involved.

c. Collaboration with Community Acupuncture: Dr. Richardson indicated she reminded the providers of acupuncture as an option for patients. She reported she will send out another reminder to providers in a few weeks to keep it fresh.

It was reported that Dr. Reidy is happy with the process the Center has in place. He brought educational materials to be placed in the Center waiting room.

XIII Open Discussion

Nothing to report.

Next Meeting: November 12, 2020 @ 12:00 PM, Community Room