



Psychiatric Health Facility (PHF) Governing Board Meeting
 Wednesday, May 22, 2019
 3:00 PM – 4:00 PM
 PHD Auditorium
 300 N San Antonio Rd, Santa Barbara
Minutes

Staff: Alice Gleghorn, PHF CEO; Ole Behrendtsen, PHF Medical Director; Laura Zeitz, Division Chief of Housing Placement/PHF; Jennifer Hidrobo, PHF Clinical Director; Sara Sanchez, Quality Care Management Coordinator; Jaime Huthsing, Quality Care Management Manager; Yaneris Muñiz, Policy & Program Coordinator; Shereen Khatapoush, Research and Program Evaluator; Karen Campos, Behavioral Wellness Administration; Teresa Martinez, Deputy County Counsel; and Lisa Valencia, 1st District Representative.

Facilitator: Terri Maus-Nisich, Assistant CEO, Health and Human Services (Chair)

Important: Items in GREY were not discussed at this month’s meeting.

Roll Call:

Present	Excused
<p>Terri Maus-Nisich, Assistant CEO, Health and Human Services (Chair)</p> <p>Supervisor Williams, Santa Barbara County Board of Supervisors, First District</p> <p>Supervisor Hart, Santa Barbara County Board of Supervisors, Second District</p> <p>Van Do-Reynoso, Director of Public Health</p> <p>Janette Pell, Director of General Services</p> <p>Polly Baldwin, Public Health Medical Director</p> <p>Arlene Diaz, Manager, Public Administrator – Guardian</p>	<p>Vincent Wasilewski, Chief Deputy for Custody Operations, Sheriff’s Department (Vice Chair)</p>

General Public Comment: none at this meeting.

1. Welcome and Overview:

- Yaneris Muñiz, Policy and Program Coordinator announced that her last day with the Department is June 17 as she has accepted a Manager position with the Emergency Operations Center.
- Supervisor Williams introduced Lisa Valencia, 1st District Representative.

Action: No action.

2. Review and Approve Minutes of the PHF Governing Board Meeting listed below:

- **April 24, 2019** (Exhibit 2a)

Action: Ms. Do-Reynoso made a motion to approve the April 24, 2019 meeting minutes as presented. Ms. Pell seconded. No abstentions. No objections. Motion carried.

3. Medical Staff Bylaws: no update at this meeting.

Action: No action.

4. Quality Assessment and Performance Plan and Indicators (QAPI):

4(a) Staff reported on the following Quality Assessment and Performance Plan and Indicators (QAPI). (EXHIBIT 4A.) Indicators that are highlighted in grey are reported to the PGB on a quarterly basis, but were not scheduled to be reported in the month of May.

Complaints and Grievances:

- Ms. Sanchez provided the report for the month of April 2019. The total number of grievances was 2, not the 5 shown on Exhibit 4a.

Infection Prevention and Control:

(Supervisor Hart arrived during Item 4a-Infection Prevention and Control)

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- Report (Quarterly: January, April, July, October) – Ms. Sanchez provided the report for the quarter ending March 31, 2019. *Hand Hygiene According to Guidelines* was off-target with corrective actions described at the end of Exhibit 4a. A discussion was held regarding creative ways to achieve targets with direction to Staff to obtain costs for a hand wash counter.

Patient Services, Care and Safety:

- Report (Quarterly: Feb, May, Aug, Nov) – Ms. Sanchez provided the report for quarter ending March 31, 2019. **A discussion was held regarding further data on patients who are readmitted to the PHF within 30 days with direction to Staff to determine the length of stays for such patients and data regarding how frequently these patients were connecting with follow-up services.** Further direction was provided to Staff to determine whether 1370 patients were readmitted within 30 days to the PHF pursuant to another court order.
- Patient Injuries - Ms. Sanchez provided the report for the month of April 2019.
- Adverse Outcomes in Patient Care - Ms. Sanchez provided the report for the month of April 2019.

Social Work Services:

- Report (Quarterly: Mar, Jun, Sept, Dec) - no report for the quarter.

Restraint/Seclusion:

- Report (Quarterly: Mar, Jun, Sept, Dec) - no report for the quarter.

Medication Use/Pharmacy Services:

- Report (Quarterly: Feb, May, Aug, Nov) - Ms. Sanchez provided the report for quarter ending March 31, 2019.
- Medication Error Rates/Unavailability (monthly) - Ms. Sanchez provided the report for the month of April 2019.
- Medication Error Rates – (monthly) – Ms. Sanchez provided the report for the month of April 2019.

Significant Adverse Outcomes:

- Ms. Sanchez provided the report for the month of April 2019.

Food and Nutritional Services:

- Report (Quarterly: Mar, Jun, Sept, Dec) - no report for the quarter.

Physician and Allied Health Professionals (AHP) Related Services:

- Report (Quarterly: Feb, May, Aug, Nov) - Ms. Sanchez provided the report for quarter ending March 31, 2019. A discussion was held regarding reaching targets for telephone medication orders.

Environmental Services (EVS):

- Report (Quarterly: Jan, Apr, Jul, Oct) - no report for the quarter.

Environment of Care (Facilities):

- Report (Quarterly: Feb, May, Aug, Nov) - Ms. Sanchez provided the report for quarter ending March 31, 2019.

- **Process Improvement Projects:**

- **Report (Quarterly: Jan, Apr, Jul, Oct) - no report at this meeting.**

4(b) QAPI Indicator List. Staff reported on proposed changes to the QAPI Indicator List. PGB provided direction to Staff to amend or delete QAPI Indicators indicated below. (EXHIBIT 4b.)

(Supervisor Williams stepped out during item 4b)

Ms. Sanchez referenced exhibit 4b proposing the following amendments to the QAPI Complete List:

Proposed removal of the following QAPI Indicators:

- #50 Room Cleanliness – as it has been on target since October 2017.

After board discussion, the PGB recommended that indicator #50 remain as is.

4(c) PHF Status Report. Staff reported on the data for the number of acute and administrative days of patients at the PHF. (Exhibit 4c)

(Supervisor Williams stepped back in during item 4c)

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- Patient Status (UR) Report (monthly) – Ms. Sanchez provided a report on the data for the month of April 2019.

The Board directed staff to break down data regarding why some administrative days are non-billable and to provide year to date average data.

4(d) Contract Monitoring Report:

- Report (Quarterly: Feb, May, Aug, Nov) – Jennifer Hidrobo provided an update on a replacement contractor for healthcare laundry services at the PHF; Chair Maus-Nisich briefly discussed the bankruptcy filing of Anka Behavioral Health, Inc. and the process to put replacement providers in place for a seamless transition for clients receiving services in the Santa Barbara and Santa Maria crisis residential treatment programs.

4(e) Significant Areas/Key Events occurring at the PHF (monthly):

- No report this month.

4(f) Process Improvement Projects (PIP)

- Report (Quarterly: Jan, Apr, Jul, Oct) –
 - o Medical Care Evaluation PIP reporting for last quarter (Exhibit 4f) - Ms. Khatapoush provided the report for quarter ending March 31, 2019.

4(g) PHF Patient Survey

- Report (as needed)
 - o PHF Patient Survey Results (Exhibit 4g) – Ms. Khatapoush provided the report. The PHF Patient Survey is also available in Spanish.

Action: Ms. Baldwin made a motion to receive reports with direction to staff to: obtain costs for a hand wash counter; to determine the length of stays for patients readmitted to the PHF within 30 days and to provide data regarding how frequently these patients were connecting with follow-up services. Further direction was provided to Staff to determine whether 1370 patients were readmitted within 30 days to the PHF pursuant to another court order; and to break down data regarding why some administrative days are non-billable and to provide year to date average data; to reject removal of QAPI indicator #50. Ms. Do-Reynoso seconded. No objections. No abstentions. Motion carried.

5. Staff will provide a report on the following Compliance:

- **Staff Credentialing/Privileging** – none at this meeting.

Action: No action.

6. Budget Development - no report at this meeting.

Action: No action.

7. Policies and Procedures – Ms. Muñiz provided an overview of the new policy listed below.

- **New Policies**
 - Discharge Planning for Homeless Patients (Exhibit 7a)
Att. A – Homeless Patient Discharge Planning Worksheet
- **Revised Policies** - none at this meeting.
- **Rescinded** - none at this meeting.
- **Other**
 - **Emergency Response Plan (ERP) (Exhibit 7b)** - Ms. Hidrobo provided an overview of the highlighted amendments made to the Emergency Response Plan. Staff were directed to make the following corrections: Page 14, under Shelter in Place, reference the Shelter in Place Policy & Procedure; Page 15, under Security Responses, between #4 & #5, add to alert Public Health Department Security Officer and Director as well as list a call chain; Page 17, under Emergency Medical Protocol, under #1, add a 9- in front of 9-1-1. ERP to be brought back for review and approval at the June meeting.

Action: Ms. Diaz made a motion to approve the new policy listed above as presented and to direct Staff to bring back the ERP with requested changes. Ms. Do-Reynoso seconded. No oppositions. No abstention. Supervisor Williams not present. Motion carried.

8. PHF Governing Board Administrative Items:

- None at this meeting.

Action: No action

9. Review of Future Meeting Agenda Items:

- Secondary QAPI items
- Emergency Response Plan
- Sharecare and homeless patient data

10. Adjournment – Meeting adjourned at 4:32 pm. Next Meeting Date, June 26, 2019