



Psychiatric Health Facility (PHF) Governing Board Meeting
 Wednesday, July 24, 2019
 3:00 PM – 4:00 PM
 PHD Auditorium
 300 N San Antonio Rd, Santa Barbara
Minutes

Staff: **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; **Hannah Atkinson**, Department Business Specialist; **Maria Arteaga**, Peer Empowerment Manager; **Dalila Brown**, Behavioral Wellness Administration; **Teresa Martinez**, Deputy County Counsel.

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>Supervisor Hart, Santa Barbara County Board of Supervisors, Second District</p> <p>Terri Maus-Nisich, Assistant CEO, Health and Human Services (Chair)</p> <p>Vincent Wasilewski, Chief Deputy for Custody Operations, Sheriff's Department (Vice Chair)</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>Supervisor Williams, Santa Barbara County Board of Supervisors, First District</p>

General Public Comment: none at this meeting.

1. Welcome and Overview:

- Dr. Ole Behrendtsen, PHF Medical Director introduced Maria Arteaga, Peer Empowerment Manager.

Action: No action.

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

- **May 22, 2019** (Exhibit 2a)

Action: Ms. Diaz made a motion to approve the May 22, 2019 meeting minutes as presented. Ms. Do Reynoso seconded. Chief Wasilewski abstained. No objections. Motion carried.

3. Medical Staff Bylaws: Receive and file a report, as applicable, on the Medical Staff Bylaws. Provide direction to Staff to amend or delete Bylaws as set forth below:

- No update at this meeting.

Action: No action.

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

On recommendation of staff, the Chair moved Item 4(e) before 4(a) on the Agenda.

4(a) Receive and file a report on the following Quality Assessment and Performance Plan and Indicators (QAPI). SEE EXHIBIT 4a.1 and 4a.2 POSTED WITH THE AGENDA. 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 June or July 2019.

Complaints and Grievances:

- Report (monthly) – Ms. Sanchez provided the report for the months of May and June 2019.

Infection Prevention and Control:

- Report (Quarterly: January, April, July, October) – Ms. Sanchez provided the report for the quarter ending June 30, 2019.

Patient Services, Care and Safety:

- Report (Quarterly: Feb, May, Aug, Nov)

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- Patient Injuries (monthly) - Ms. Sanchez provided the report for the months of May and June 2019.
 - Adverse Outcomes in Patient Care (monthly) - Ms. Sanchez provided the report for the months of May and June 2019.

Social Work Services:

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

Restraint/Seclusion:

- Report (Quarterly: Mar, Jun, Sept, Dec) - Ms. Sanchez provided the report for the quarter ending March 2019.

Medication Use/Pharmacy Services:

- Report (Quarterly: Feb, May, Aug, Nov)
- Medication Error Rates/Unavailability (monthly) - Ms. Sanchez provided the report for the months of May and June 2019.
- Medication Error Rates (monthly) – Ms. Sanchez provided the report for the months of May and June 2019.

Significant Adverse Outcomes:

- Report (monthly) – Ms. Sanchez provided the report for the months of May and June 2019.

Food and Nutritional Services:

- Report (Quarterly: Mar, Jun, Sept, Dec) – Ms. Sanchez reported for the quarter ending March 2019.

Physician and Allied Health Professionals (AHP) Related Services:

- Report (Quarterly: Feb, May, Aug, Nov)

Environmental Services (EVS):

- Report (Quarterly: Jan, Apr, Jul, Oct) – Ms. Sanchez gave the report for the quarter ending June 2019.

Environment of Care (Facilities):

- Report (Quarterly: Feb, May, Aug, Nov)

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.)

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

- **Reordering the numbers for each indicator per Exhibit 4b**

- **Adding Indicator D-3 Telephone Orders**

- **Revising the following indicators:**

#16 (reordered #D2) Rate of Complete Psychotropic Medication Consents

#42 (reordered #D4) Appropriateness of Poly Pharmacy Antipsychotic Therapy

#52 (reordered #K1) Staff Knowledge about Unsafe /Hazard Condition

#53 (reordered #K2) Emergency Management Employee Education

#54 (reordered #K3) Emergency Management Activation

#55 (reordered #K4) Fire Drills

#56 (reordered #K5) Review of Escape Routes During Construction

#57 (reordered #K6) Staff Knowledge of the Fire Plan

#58 (reordered #K7) Management of Physical Environment

- **Removing the following QAPI Indicators:**

#13 Patient Falls Leading to Injury Requiring Treatment

#24 Rate of Appropriate and Accurate Diets

#50 Room Cleanliness

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- Modify the current Indicator List to remove items that have been in compliance and to add new items going forward.
 - During the meeting, staff recommended not revising Indicator #55 to add “internal disaster.” After discussion, the board recommended to approve the renumbering of the indicators, add indicator D-3 Telephone Orders, and revise the indicators per the proposed changes in accordance with exhibit 4b, with the exception of Indicator #55 Fire Drills as recommended by staff. The board directed staff to return after all findings from the PHF CMS/SDPH audit are received before they approve removing the indicators as proposed by staff. The board further directed staff to remove the prioritization column from the Complete Indicator List, asterisk what is required by external sources, and return to the board with a recommendation for an audit strategy of indicators.

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)

- Patient Status (UR) Report (monthly) – Ms. Sanchez provided a report on the data for the months of May and June 2019.
- The board briefly discussed placement options for ISTs at the PHF. A new crisis residential center in Santa Maria will be open in the Fall of 2019. A brief discussion was held regarding the process for obtaining a conservatorship. The board directed staff to remove ISTs from the averages on the PHF Status Reports.

4(d) Contract Monitoring Report:

- Report (Quarterly: Feb, May, Aug, Nov)
 - o Psychiatric Services, Edwin Feliciano, MD Contract
 - o Pharmacy Services, Federal Drug Contract
 - o South Coast Janitorial Contract
 - o Food Auditing & Monitoring, Valle Verde Contract
 - o Medical Staffing, Maxim HealthCare Services Contract
 - o Infection Control, Andra Dillard Contract – Ms. Hidrobo reported that everything is going well with infection control and thanked Public Health for allowing Ms. Dillard to assist during the CMS/CDPH audit.
 - o Laundry Service, Aramark Contract – Ms. Hidrobo reported that the transition from Aramark to Mission Linens is complete.

4(e) Significant Areas/Key Events occurring at the PHF (monthly). Receive and file a report on the following significant areas and key events occurring at the PHF:

- Department of Health Care Services (DHCS) Audit Results & Plan of Correction Update

Staff provided an update on the July 15-18, 2019 audit conducted by the Centers for Medicare and Medicaid Services (CMS) and the California Department of Public Health (CDPH). Staff discussed the following deficient areas identified by the auditors:

- Medical Staff Credentialing
- Sheriff MOU
- Ligature Risks
- Nutrition
- Pharmacy
- Infection Control
- Volume of QAPI Indicators
- Electronic Health Records (EHR) Implementation

Staff reported that overall, the audit was positive. Staff will return to the board after the written findings have been received to discuss the Plan of Correction and obtain further direction from the board as needed.

- Vacancies
 - **1414 filling for Psychiatric Technician Team supervisor**
Ms. Zeitz reported she is looking into an individual appointment to fill the Psychiatric Technician supervisor position as recruitments have been unsuccessful. Discussions with Human Resources on how to proceed are in progress.
 - **LCSW Health Care Coordinator (Social Services Director)**
Ms. Zeitz reported that the LCSW position has not been filled. Bonnie Zant is acting as interim LCSW Health Care Coordinator. The board directed staff to discuss with Human Resources regarding filling the position.
- **Recruitment Update - No update**

4(f) Process Improvement Projects (PIP)

- **Report (Quarterly: Jan, Apr, Jul, Oct)**

4(g) PHF Patient Survey

- **Report (as needed)**

Action: Ms. Do-Reynoso made a motion to receive reports with direction to staff as indicated above. Chief Wasilewski 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. Atkinson provided an overview of the new policy listed below.

- **New Policies**
 - Peer Review Process (Exhibit 7a)
- **Revised Policies**
 - Staff Orientation and Training for Seclusion and Restraint (Exhibit 7b)
 - TB Screening (Exhibit 7c)
 - Attachment A
- **Other**
 - Emergency Response Plan (Exhibit 7d)
 - Emergency Preparedness Communications Plan (Exhibit 7e)

Action: Ms. Diaz made a motion to approve and adopt all the policies listed above as presented. Ms. Do-Reynoso seconded. No abstentions. Motion carried.

8. Discuss PHF Governing Board Administrative Items:

- None at this meeting.

Action: No action

9. Review of Future Meeting Agenda Items:

- Conservatorship Pathway In/Out of PHF
- Mapping trends for QAPI Report
- Internal coordination with Human Resources regarding LCSW Health Care Coordinator position

10. Adjournment – Meeting adjourned at 4:25 pm. Next Meeting Date, August 28, 2019