

CQI Meeting Agenda

July 25, 2017

10:00am

- Call to order
- Minutes reviewed, approved
- Risk Management
 - Man Down Reviews
 - Off-Site
- Infection Control
- Grievances
- Disaster Drills
- Peer Reviews
- Critical Clinical Events
- Pharmacy & Therapeutics
 - Medication issues/errors
- Physician feedback
 - Record review findings
- CQI Routine Monitoring
- New issues identified
- Improvement Plans
 - Findings and follow-up (all IPs to remain on agenda until follow-up completed)
- New business for discussion
- Adjournment

CQI Meeting Minutes

Date: 07/25/17

Site: Santa Barbara

Attendees: V Wasilewski, Chief; S Lammer, Lt.; E Hseuh, SBSO; Joanna Garcia, RVP; A Bagby, H.S.A.; J Gerht, Pharmacy; B Fogata, Admin; A Dyball, D.O.N.; J Woody, MFT

Risk Management Report

Review of incident reports: We had 22 man down emergencies.
Review of transportation logs: There were 48 offsite visits this month. No trends identified. There were 18 ER visits this month. No trends identified..
Review of credentials log: Up to Date

Infection Control Report

Trends: During the month there were 9 cases of suspected skin infection identified. No trends identified.
Practices: Continue to track cases as identified and intervene as needed. Also, during patient encounters, continue to educate and stress the importance of good hand washing.

Grievances

There were 57 grievances for medical this month. All were found without merit. The majority of grievances were patients asking for specific diet changes and off site specialty care, not deemed medically necessary.

Man Down and Disaster Drills

The mass casualty disaster drill to be scheduled for 4 th Quarter 2017. Man Down drills scheduled each month with staff meeting reviews.

Peer Reviews

Scheduled for 4 th Quarter, 2017.

Pharmacy & Therapeutics

Medication Issues/Errors

There were 4 medication errors reported without any trends identified. Pharmacy quarterly audit completed and no issues identified. Limitations on ordering of extended release medications.

Physician Feedback

Record Review Findings/Care Management trends: Nursing completing standardized procedures (SP) need to be diligent in following the pathway instructions. Medications to be given per SP must be ordered by a provider. Suicide training information distributed to officers and housing units. Attention to detail. Problem List updates during any chart encounter. Dental complaints must be seen and assessed by nursing prior to be scheduled for dentist.

CQI Routine Monitoring

Study	Findings	IP required? Yes or No
Sick Call	Overall Compliance 97% Repeat in two months.	YES
Individualized Treatment Plan	Overall Compliance 97% Repeat in one year.	NO

CQI Meeting Agenda

August 29, 2017

10:00am

- Call to order
- Minutes reviewed, approved
- Risk Management
 - Man Down Reviews
 - Environmental Inspection
 - Off-Site
- Infection Control
- Grievances
- Disaster Drills
- Peer Reviews
- Critical Clinical Events
- Pharmacy & Therapeutics
 - Medication issues/errors
- Physician feedback
 - Record review findings
 - Care Management
- CQI Routine Monitoring
- New issues identified
- Improvement Plans
 - Findings and follow-up (all IPs to remain on agenda until follow-up completed)
- New business for discussion
- Adjournment

CQI Meeting Minutes

Date: 08/29/17

Site: Santa Barbara

Attendees: V Wasilewski, Chief; S Lammer, Lt.; M Mahurin, Lt; P Fischer, BeWell; Dr Baldwin, PHD; A Bagby, H.S.A.; B Fogata, Admin; A Dyball, D.O.N.; S Sanchez, LMFT

Risk Management Report

Review of incident reports: We had 11 man down emergencies.	
Review of transportation logs: There were 28 offsite visits this month. No trends identified. There were 18 ER visits this month. No trends identified..	
Review of credentials log: Up to Date	

Infection Control Report

Trends: During the month there were 21 cases of suspected skin infection identified. No trends identified.	
Practices: Continue to track cases as identified and intervene as needed. Also, during patient encounters, continue to educate and stress the importance of good hand washing.	

Grievances

There were 42 grievances for medical this month. All were found without merit or addressed and resolved.	
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Man Down and Disaster Drills

The mass casualty disaster drill to be scheduled for 4 th Quarter 2017. Man Down drills scheduled each month with staff meeting reviews.	
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Peer Reviews

Scheduled for 4 th Quarter, 2017.	
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Pharmacy & Therapeutics

Medication Issues/Errors

There were 3 medication errors reported without any trends identified. Next pharmacy quarterly audit scheduled and no issues identified. Limitations on ordering of extended release medications.	
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Physician Feedback

Record Review Findings/Care Management trends: Attention to detail. Problem List updates during any chart encounter. Dental complaints must be seen and assessed by nursing prior to be scheduled for dentist.	
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CQI Routine Monitoring

Study	Findings	CAP required? Yes or No
Standardized Procedures	Overall Compliance 100% Repeat in one year.	NO
Receiving Screening	Overall Compliance 95% Repeat in two months.	YES
		NO

New Issues Identified

- 1) When chronic care conditions are identified, provider must be notified to begin medications
- 2) Possible consequences of refusal must be documented, reason for refusal must be documented and refusal must be witnessed by at least one medical professional.
- 3) Ancillary Services, Lab/Xray, must have provider order before diagnostic test can be completed.
- 4) Problem List review and Update with every patient chart encounter.

Improvement Plans

Issue	Plan	Progress toward Goal	Next Steps	Responsible Person	Target Date
Sick Call	Was the patient seen within the appropriate timeframe following the triage (48 hours)	Training of staff Initial Study 84%. Restudy August 2017 – 96%. Continue to monitor.	Training in staff meeting Follow Up Study to be conducted.	A Bagby, H.S.A.	09/01/2017 Re-Study in August, 2017

Adjourn

CQI Meeting Agenda
Aug 2017
SANTA BARBARA COUNTY
September 26th, 2017
10:00 am

- Call to order
- Minutes reviewed, approved
- Risk Management
 - Man Down Reviews
 - Environmental Inspection
 - Off-Site Events
- Infection Control
- Grievances
- Disaster Drills
- Peer Reviews
- Critical Clinical Events
- Pharmacy & Therapeutics
 - Medication issues/errors
- Physician feedback
 - Record review findings
 - Care Management
- CQI Routine Monitoring
- New issues identified
- Improvement Plans
 - Findings and follow-up (all CAPs to remain on agenda until follow-up completed)
- New business for discussion
- Adjournment

CQI Meeting Minutes

Date: 09/26/17

Site: Santa Barbara

Attendees: V Wasilewski, Chief; S Lammer, Lt.; M Mahurin, Lt; P Fischer, BeWell; Dr Baldwin, PHD; A Bagby, H.S.A.; B Fogata, Admin; A Dyball, D.O.N.; S Sanchez, LMFT

Risk Management Report

Review of incident reports: We had 7 man down emergencies.
Review of transportation logs: There were 35 offsite visits this month. No trends identified. There were 13 ER visits this month. No trends identified..
Review of credentials log: Up to Date

Infection Control Report

Trends: During the month there were 7 cases of suspected skin infection identified. No trends identified.
Practices: Continue to track cases as identified and intervene as needed. Also, during patient encounters, continue to educate and stress the importance of good hand washing.

Grievances

There were 27 grievances for medical this month. All were found without merit or addressed and resolved.

Man Down and Disaster Drills

The mass casualty disaster drill to be scheduled for November 17 th , 2017. Man Down drills scheduled each month with staff meeting reviews.

Peer Reviews

Scheduled for 4 th Quarter, 2017.

Pharmacy & Therapeutics

Medication Issues/Errors

There were 2 medication errors reported without any trends identified. Next pharmacy quarterly audit scheduled and no issues identified. Limitations on ordering of extended release medications.

Physician Feedback

Record Review Findings/Care Management trends: Attention to detail. Problem List updates during any chart encounter. Dental complaints must be seen and assessed by nursing prior to be scheduled for dentist.

CQI Routine Monitoring

Study	Findings	CAP required? Yes or No
Standardized Procedures	Overall Compliance 100% Repeat in one year.	NO
Receiving Screening	Overall Compliance 95% Repeat in two months.	YES
		NO

New Issues Identified

- 1) When chronic care conditions are identified, provider must be notified to begin medications
- 2) Possible consequences of refusal must be documented, reason for refusal must be documented and refusal must be witnessed by at least one medical professional.
- 3) Ancillary Services, Lab/Xray, must have provider order before diagnostic test can be completed.
- 4) Problem List review and Update with every patient chart encounter.

Improvement Plans

Issue	Plan	Progress toward Goal	Next Steps	Responsible Person	Target Date
On site Emergency response	Compliance in accurate completion of ON-Site Emergency Response Record	Training of staff initial 33%	Training in staff meeting follow Up Study to be conducted.	A Dyball, interim H.S.A.	Oct 17
Patient not asked about initial pain scale level	Compliance in documenting patient pain scale	Training of staff initial 25%	Training in staff meeting follow up study to be conducted	ADyball, interim HSA	Oct 17
No priority level noted for scheduling dental appointments	Priority one/priority 2	Training of staff initial 9%	Training in staff meeting, follow up study to be conducted	ADyball, interim H.S.A	Nov 17
If the patient required an extraction was a consent for oral surgical procedures completed	All patients that are requiring will be asked to sign a consent	Training of staff initial 67%	Education to dental staff that a consent form will need to be signed. Make sure consent is available to them prior to procedure	A Dyball, interim H.S.A	Nov 17
Was the patient provided with treatment for pain relief while awaiting assessment by the Dentist (if they complained of Pain)	All patients that are in pain while waiting to see the dentist will be offered an analgesic	Training of staff initial 71%	Education to the nursing staff to provide an analgesic, if they chose to refuse the analgesics then a refusal must be obtained	A Dyball, interim H.S.A	Nov 17

Adjourn

CQI Meeting Agenda
Sept 2017
SANTA BARBARA COUNTY
October 26th, 2017
10:00 am

- **Call to order**
- **Minutes reviewed, approved**
- **Risk Management**
 - **Man Down Reviews**
 - **Environmental Inspection**
 - **Off-Site Events**
- **Infection Control**
- **Grievances**
- **Disaster Drills**
- **Peer Reviews**
- **Critical Clinical Events**
- **Pharmacy & Therapeutics**
 - **Medication issues/errors**
- **Physician feedback**
 - **Record review findings**
 - **Care Management**
- **CQI Routine Monitoring**
- **New issues identified**
- **Improvement Plans**
 - **Findings and follow-up** (all CAPs to remain on agenda until follow-up completed)
- **New business for discussion**
- **Adjournment**

CQI Meeting Minutes

Date: 10/26/17

Site: Santa Barbara

Attendees: V Wasilewski, Chief; Commander Powell; Lt. M Mahurin; P Fischer, BeWell; Dr Baldwin, Amber Dyball, interim H.S.A; Trena Tobin interim D.O.N; S Sanchez, LMFT; Josh Woody, LMFT; Patrick Turner, CFMG; Janette Avina, PHD;

Risk Management Report

Review of incident reports: We had 9 man down emergencies.
Review of transportation logs: There were 35 offsite visits this month. No trends identified. There were 16 ER visits this month. No trends identified..
Review of credentials log: Up to Date

Infection Control Report

Trends: During the month there were 9 cases of suspected skin infection identified. No trends identified.
Practices: Continue to track cases as identified and intervene as needed. Also, during patient encounters, continue to educate and stress the importance of good hand washing.

Grievances

There were 36 grievances for medical this month. All were found without merit or addressed and resolved.

Man Down and Disaster Drills

Man Down Drill was performed on October 25 th . The mass casualty disaster drill to be scheduled for November 17 th , 2017. Man Down drills scheduled each month with staff meeting reviews.

Peer Reviews

Scheduled for 4 th Quarter, 2017.

Pharmacy & Therapeutics

Medication Issues/Errors

There were 0 medication errors reported this month. Pharmacy quarterly audit was performed and there were no issues identified.

Physician Feedback

Record Review Findings/Care Management trends: Attention to detail. Problem List updates during any chart encounter. Dental complaints must be seen and assessed by nursing prior to be scheduled for dentist.

CQI Routine Monitoring

Study	Findings	CAP required? Yes or No
Continuity of Care	Overall Compliance 62% Repeat in two months	Yes
Management of Pharmaceuticals	Overall Compliance 85% Repeat in two months.	Yes

CQI Meeting Agenda
Oct 2017
SANTA BARBARA COUNTY
November 30th, 2017
10:00 am

- **Call to order**
- **Minutes reviewed, approved**
- **Risk Management**
 - **Man Down Reviews**
 - **Environmental Inspection**
 - **Off-Site Events**
- **Infection Control**
- **Grievances**
- **Disaster Drills**
- **Peer Reviews**
- **Critical Clinical Events**
- **Pharmacy & Therapeutics**
 - **Medication issues/errors**
- **Physician feedback**
 - **Record review findings**
 - **Care Management**
- **CQI Routine Monitoring**
- **New issues identified**
- **Improvement Plans**
 - **Findings and follow-up** (all CAPs to remain on agenda until follow-up completed)
- **New business for discussion**
- **Adjournment**

CQI Meeting Minutes

Date: 11/30/17

Site: Santa Barbara

Attendees: Chief V. Wasilewski, Lt. S. Lammer, Amber Nunes, H.S.A. Trena Tobin, Interim D.O.N., Bailey Fogata, Admin Asst, Joshua Woody, LMFT, Lt. Mark Mahurin, B. Well representative, Public Health representative

Risk Management Report

Review of incident reports: There were 13 incident reports for the month.

Trends: Failure of follow through from Intake, transcription errors from end of the month MARs. Doctors orders not being noted timely, medications not bridged from intake(no longer a standard of practice). There was one incident reported from PHD regarding HIV medications for a patient.

Review of transportation logs:

There were 43 offsite visits this month compared to 32 visits in the previous month. No other trends identified. There were 9 ER visits this month compared to 16 in the previous month with no trends identified.

Review of environmental inspection reports/issues:

All issues were addressed in a timely manner. Trends identified were overflowing biohazard cans, overflowing trash receptacles and overfilled sharps containers.

Review of credentials log:

Up to Date

Infection Control Report

Trends:

No trends identified.

Practices:

Continue to track cases as identified and intervene as needed. Also, during patient encounters, continue to educate and stress the importance of good hand washing.

Grievances

There were 29 grievances for medical this month, compared to 36 in the previous month. All were found without merit. The majority of grievances were patients asking for specific medications and off site specialty care, not deemed medically necessary. Three were same patient with same complaint.

Man Down and Disaster Drills

The mass casualty disaster drill took place on November 17th, 2017 and will be discussed in the November CQI meeting. We will begin to schedule our 2018 man down drills. Each man down drill will be followed by a De-brief and then follow up at the monthly staff meeting to discuss the critique.

Peer Reviews

None in the month of October.

Critical Clinical Events

0 events reported.

Pharmacy & Therapeutics

Medication Issues/Errors

There was 1 medication error reported without any trends identified. Pharmacy quarterly audit will take place on December 12th, 2017. Limitations on ordering of sleep-aids by our Psychiatrist.

CQI Meeting Agenda
Nov. & Dec. 2017
SANTA BARBARA COUNTY
January 25th, 2018
11:30 am

- **Call to order**
- **Minutes reviewed, approved**
- **Risk Management**
 - **Man Down Reviews**
 - **Environmental Inspection**
 - **Off-Site Events**
- **Infection Control**
- **Grievances**
- **Disaster Drills**
- **Peer Reviews**
- **Critical Clinical Events**
- **Pharmacy & Therapeutics**
 - **Medication issues/errors**
- **Physician feedback**
 - **Record review findings**
 - **Care Management**
- **CQI Routine Monitoring**
- **New issues identified**
- **Improvement Plans**
 - **Findings and follow-up** (all CAPs to remain on agenda until follow-up completed)
- **New business for discussion**
- **Adjournment**

CQI NOVEMBER/DECEMBER Meeting Minutes

Date: 01/25/18

Site: Santa Barbara

Attendees: Chief V. Wasilewski, Lt. S. Lammer, Commander C. Powell, Amber Nunes, H.S.A. Trena Tobin, Interim D.O.N., Bailey Fogata, Admin Asst, Pamela Fischer B. Well, Joanna Gehrt LVN/Pharmacy coordinator

Risk Management Report

Review of incident reports: There were 17 incident reports for the month of November and 4 for December.
 Trends: delays in patient care d/t not following through (i.e. referring pt's to providers or starting medications/treatments etc.), medication errors. All incidents were addressed with staff.

Review of transportation logs:

There were 38 offsite visits in november compared to 43 visits in the previous month. 38 off site visits in December. No trends identified. There were 9 ER visits in November and 9 in December compared to 9 in the previous month with no trends identified.

Review of environmental inspection reports/issues: formal environmental inspection report specific to medical areas has not been done but will start January 2018.

All issues were addressed in a timely manner.

Trends identified were overflowing trash receptacles and dirty floors. Assigned cleaning duties to nursing staff.

Review of credentials log:

Up to Date

Infection Control Report

Trends: Syhillis, MRSA

Practices:

Continue to track cases as identified and intervene as needed. Also, during patient encounters, continue to educate and stress the importance of good personal hygiene and use of protection during sexual activity.

Grievances

There were 26 grievances for medical in November and 54 in December compared to 29 in the previous month. 1 was found with merit. Medication time change was a trend along with having pain medications discontinued.

Man Down and Disaster Drills

The mass casualty disaster drill took place on November 17th, 2017. The drill performed was an earthquake scenario. It took place on the day shift. Custody deputies responded quickly but once on scene needed direction on what to do. Medical staff responded more slowly. There was initial confusion on who was leading. Once a nurse took charge and gave clear directions the simulation ran smoothly. Every injured person was correctly triaged and moved to the appropriate triage location. Custody and Medical staff worked well together.

Peer Reviews

None in the month of November/ *December*

Critical Clinical Events

0 events reported.

Pharmacy & Therapeutics

Medication Issues/Errors

There were 4 medication error reported in November and 2 in December the trends were transcription errors. Pharmacy quarterly audit did not take place on December 12th like planned. We are switching to Correct RX January 25th 2018.

CQI Meeting Agenda

SANTA BARBARA COUNTY

February 28th, 2018
11:30 am

- **Call to order**
- **Minutes reviewed, approved**
- **Behavioral Wellness chart audit**
- **Risk Management**
 - **Man Down Reviews**
 - **Environmental Inspection**
 - **Off-Site Events**
- **Infection Control**
- **Grievances**
- **Disaster Drills**
- **Peer Reviews**
- **Critical Clinical Events**
- **Pharmacy & Therapeutics**
 - **Medication issues/errors**
- **Physician feedback**
 - **Record review findings**
 - **Care Management**
- **CQI Routine Monitoring**
- **New issues identified**
- **Improvement Plans**
 - **Findings and follow-up** (all CAPs to remain on agenda until follow-up completed)
- **New business for discussion**
- **Adjournment**

CQI JANUARY Meeting Minutes

Date: 02/28/18

Site: Santa Barbara

Attendees: Chief V. Wasilewski, Lt. S. Lammer, Commander C. Powell, Amber Nunes, H.S.A. Trena Tobin, D.O.N., Bailey Fogata, Admin Asst, Jamie Huthsing B. Well, Sgt. M. Mahurin, C. Lee BSU, P. Baldwin Public Health

Risk Management Report

Review of incident reports: There were 3 incident reports for the month of January. Trends: none identified
Review of transportation logs: There were 31 offsite visits in november compared to 38 visits in the previous month. No trends identified. There were 13 ER visits in January compared to 9 in the previous month with no trends identified.
Review of environmental inspection reports/issues: Not started yet
Review of credentials log: Up to Date

Infection Control Report

Trends: none identified
Practices: Continue to track cases as identified and intervene as needed. Also, during patient encounters, continue to educate and stress the importance of good personal hygiene and use of protection during sexual activity.

Grievances

There were 35 grievances for medical in January compared to 54 in the previous month.

Man Down and Disaster Drills

None

Peer Reviews

None in the month of January.

Critical Clinical Events

0 events reported.

Pharmacy & Therapeutics

Medication Issues/Errors

There were 0 medication errors reported January. We switched to Correct RX January 25 th 2018.

Physician Feedback

Record Review Findings/Care Management trends: Nursing completing S/P's need to be diligent in following the S/P instructions, any deviations need to be ordered by a provider. Nursing staff needs to confirm the data they input into COR is properly saved. Medications, both medical and psych need to be bridged on intake per S/P and must be ordered by contacting the appropriate provider. Nurses need to utilize their assessment skills and gather data before contacting providers. Nurses need to adhere to company protocols regarding man downs vs. sick call requests. Nursing must complete assessments on patients returning from the hospital, medical appointments or state facilities. Nursing

staff must follow up on ROI's and ensure the necessary information has been received. Nursing staff must follow up on chronic care patients to ensure the necessary data has been collected prior to seeing the provider, ie adequate number of documented blood pressures for pt w/HTN.

CQI Routine Monitoring

Study	Findings	IP required? Yes or No
HTN	Overall Compliance 67% Repeat in one year.	YES
Emergency services	Overall Compliance 89% Repeat in one year.	YES

New Issues Identified

- 1) Essential medications not being started at intake due to labs needing to be drawn to ensure renal integrity.
- 2) Patient pain is not being assessed during emergency situations.
- 3) Onsite emergency form not being filled out completely.

Improvement Plans

Issue	Plan	Progress toward Goal	Next Steps	Responsible Person	Target Date
HTN	*NOTE* Audits results from current provider indicate 100% compliance, numbers that drove down the score are from the previous provider, however, the charts were chosen at random so the data was included.	Guidelines reviewed with provider.	Follow Up Study to be conducted.	T Tobin, D.O.N.	Re-Study monthly
Emergency Services	Nursing staff given an article from NIH on improving the quality of care through pain assessment and management. Questions regarding the article were then completed	Staff have started to hand in their completed quality improvement education information/test.	Follow Up Study to be conducted and audit given monthly until compliance is at 93%	T Tobin, D.O.N	Re-Study April 2018

Adjourn

CQI Meeting Agenda
February/March 2018
SANTA BARBARA COUNTY

April 28th, 2018
10:00 am

- **Call to order**
- **Minutes reviewed, approved**
- **Risk Management**
 - **Man Down Reviews**
 - **Environmental Inspection**
 - **Off-Site Events**
- **Infection Control**
- **Grievances**
- **Disaster Drills**
- **Peer Reviews**
- **Critical Clinical Events**
- **Pharmacy & Therapeutics**
 - **Medication issues/errors**
- **Physician feedback**
 - **Record review findings**
 - **Care Management**
- **CQI Routine Monitoring**
- **New issues identified**
- **Improvement Plans**
 - **Findings and follow-up** (all CAPs to remain on agenda until follow-up completed)
- **New business for discussion**
- **Adjournment**

CQI FEBRUARY/MARCH Meeting Minutes

Date: 04/26/18

Site: Santa Barbara

Attendees: Chief Wasilewski, Lt. S. Lammer, B. Fogata, Admin Asst, J. Gehrt, LVN, D. Bernal, FNP, P. Baldwin Public Health.

Risk Management Report

Review of incident reports: There were 6 incident reports for the month of February and March. Trends: MH medications not being bridged from intake.
Review of transportation logs: Reviewed in MAC meeting
Review of environmental inspection reports/issues: <ol style="list-style-type: none"> 1. No exit signs in treatment rooms (not sure if this is necessary) 2. No eye wash stations installed 3. Dental does not have thick nitrile gloves for cleansing dental instruments 4. Step stool in dental office broken 5. 1 cabinet in east not labeled that it has chemicals in it.
Review of credentials log: Up to Date

Infection Control Report

Trends: none identified
Practices: Continue to track cases as identified and intervene as needed. Also, during patient encounters, continue to educate and stress the importance of good personal hygiene and use of protection during sexual activity.

Grievances

There were 27 grievances for medical in February compared to 35 in the previous month. There were 37 in March with 3 founded grievances.

Man Down and Disaster Drills

None

Peer Reviews

None in the month of February/March.

Critical Clinical Events

1 event reported.

Pharmacy & Therapeutics

Medication Issues/Errors

There were 0 medication errors reported February/March.

Physician Feedback

Record Review Findings/Care Management trends: Nurses are not following through with intake mediations and follow up appt's with providers

CQI Routine Monitoring

Study	Findings	IP required? Yes or No
Management of health records	Overall Compliance 97% Repeat in one year.	No
Communicable Diseases	Overall Compliance 56% Repeat in three months	YES
Continuity of care and discharge planning	Overall Compliance 67% Repeat in three months	YES
Informed Consent and right to refuse	Overall Compliance 74% Repeat in three months	YES
Chronic care Diabetes	Overall Compliance 85% Repeat in three months	YES

New Issues Identified

- 1) Infection control manuals not at each nursing station.
- 2) Environmental inspection report not implemented until March 2018.
- 3) Essential medication for diabetes not being started at intake due to needing labs prior to start.
- 4) Labs being ordered at first CC visit.
- 5) Refusals not being filled out entirely
- 6) Consents for psych meds was not being completed-they are now
- 7) Consents for procedures not always being completed
- 8) Labs results not being communicated to patients

Improvement Plans

Issue	Plan	Progress toward Goal	Next Steps	Responsible Person	Target Date
Infection control manuals not at each nursing station.	ordered	On order	Distribute once they are in	J. Gehrt	1 month
Refusals not being filled out entirely	Email sent to staff to remind them to fill out entirely	Will repeat instructions at staff meeting	Follow Up Study to be conducted	A. Nunes	3 months
Consents for psych meds was not being completed	New psychiatrist was not aware this had to be done. It is now being done, Psych RN's are going back through lists of pt's on meds and getting consents signed	Done	n/a		
Lab results not being communicated to patients	Providers are now going to discuss lab results at every CC appt and document conversation	Being done	Reaudit	A.Nunes	3 months

Adjourn