

Minutes
Developmental Disabilities Resource Board of Directors
DDRB Board Meeting with DMH
March 27, 2018

The **Board of Directors of DDRB** met in open session on Tuesday, March 27, 2018 at 5:30 pm at the DDRB office. The meeting was called to order by Chairman, Gary Steinman. Those present at the meeting and noted by Roll Call were Gary Steinman, Tom Bradley, Stephen Elliott, Pat Schoenrade, James Gottstein, Alan Naylor, and Rick White. Also present was Sonja Bennett. Invited guests included Wendy Witcig and Tim Wholf with the Department of Mental Health; Linda Holland and Anita Hartman with Center for Human Services.

Guests present were:

Laurie Brewer, Della Lamb

Julie Edlund, Life Unlimited

Announcements

Gary Steinman noted the meeting was called to discuss the “Event Reporting Process” and the updated DMH Contract for Targeted Case Management. He thanked Wendy for driving from Jefferson City to participate in the meeting. He thanked all the invited guests for taking the time to attend and input. Tim Wholf arrived after the meeting was called to order but was also thanked for taking the time to attend.

Event Reporting Process

Wendy Witcig that she had recently attended the Victimization Task Force Meeting in which our board member, Sargent James Gottstein was also in attendance. In conversation, she became aware that DDRB was receiving the Event Management Tracking (EMT) reports from the various agencies. (Note: This was the policy that the board placed into effect January 1, 2018.) She noted that she checked with DMH General Counsel and they were concerned about this reporting could be a violation of HIPPA. She said that in order to receive these reports there needed to be a “business purpose” and a “business agreement” in place.

Gary interjected that he felt the board was entitled to know if consumers we are funding are being injured. We do not want to violate any HIPPA rules but the board feels that we need to be aware in order to raise any pertinent issues and then know what is being done to correct the problem. He said he was not sure how much of the information on the EMT we needed, perhaps not even the name of the person; we implemented that procedure as it seemed to be the most expedient and least redundant for the agencies. Steve Elliot and Rick White both commented their essential agreement with Gary.

Wendy pointed out that she understood our request and did not necessarily disagree with our intention. But she said that the EMT is a DMH document that includes protected health information of the clients and that DMH is obligated to their contracted agencies and clients to

protect that information. Laurie Brewer said that she did not include any “health” information on the EMT’s that she submits. Wendy provided a copy of the Event Processing Check List (copy attached) which outlines all the step with authorities. None of the information provided in this process is public, she said. When asked, she said that across the state there are about 35,000 made annually, 1500 of which make to an inquiry, and 400 reach a threshold of probable cause for investigation. Once this threshold is reached, some of the actions that might be taken by DMH are agency plans of corrections, no growth-no referral or an agency place on critical status. All agencies are “required” to report EMT. Anita also said that SC’s file areas of concern, small and large, in a APTS system that is reviewed by DMH and these might be seen as pre-cursors to potential issues.

Gary said that we want to know if events are happening and where and asked for a recommended process from Wendy. She thought that neither the Event Report or Investigation Report would provide the information the board is looking to review. She said the State is monitoring compliance and collecting data. They compile that information into a Quarterly Trend Report. She that the Case Managers were the front line of this reporting process and should receive the information. Anita and Linda both stated they do not receive any of this information on a regular basis. Anita said that if the EMT was filed electronically the Case Managers/Service Coordinators (SC) receive it. If it is filed by paper, they do not and the agency is not required to send it to the SC. Linda Holland said she thought the most helpful report to DDRB would be the Trend Report as it would better show the whole health of the agency. The SC and SC Supervisors should receive all the Investigation and Follow Up Reports which they currently are not receiving. Julie Edlund said that an agency could not be judged based on the volume of EMT’s but the number of issues that rise the level of “abuse or neglect”. Tim Wholf said that KCRO has 3 people reviewing 1200-1700 EMT’s per month. They are in the process of changing the system to require all EMT’s be filed electronically which will then eliminate the issue of the SC’s not receiving the information. He will send out a follow up on the reporting policy to all agencies. (Note: See attached April 3 policy letter sent to all agencies relative to event reporting). KCRO does Trend Reports annually and quarterly. He will review the “system” to insure the glitch is repaired that has prevented Case Management from receiving these reports regularly. He will also provide these reports to Sonja, annually and quarterly and will provide assistance in interpreting the information in the reports.

The board requested Sonja issue a letter to all funded agencies rescinding the Event Reporting Policy of January 1, 2018. (Note: Copy of that email is attached to these minutes). They also requested that she follow up with Tim Wholf on the quarterly trend reporting and at the appropriate time, provide an update to the board.

Targeted Case Management Contract

With respect to the Targeted Case Management (TCM) Contract Amendment, Gary said that he had suggested some changes to the July 1, 2017 amendment just recently received (front page of agreement attached to these minutes). His concern is that the Amendment which states that the original or previous contract is “replaced in its entirety” makes no reference to the

DDRB but rather Center for Human Services Clay County TCM. Simply changing the contract to read Developmental Disabilities Resource Board as the “contractor” leaves CHS out entirely and the references in the contract to “contractor” would imply that DDRB is responsible or doing all of those things, which we do not, and leaves CHS out altogether, who is actually performing all those activities. Further, the contract does not state that we (DDRB) can subcontract the services to CHS. This is what prompted him to send his “suggested changes” (copy attached to these minutes) to DMH on behalf of the board.

Wendy said that the provider # or contract # was with DDRB but CHS was the entity performing the services. She said that Clay and Polk counties are the only two counties in the state that are contracted directly with the state. She said she understands our concern and will take the suggestions back to Gary Schanzmeyer with DMH and DMH General Council and get back with us.

Adjourn

The meeting was adjourned to open the regularly scheduled meeting of the board.

Respectfully submitted: Sonja Bennett
April 6, 2018