



GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT ON DISABILITY SERVICES

Quality Improvement Committee (QIC) Meeting Minutes

Tuesday, October 3, 2017

In Attendance:

Titilayo Ilori, RN, Health & Wellness, DDA
Matt Mason, Ph.D., GUCCHD
Marc Clarke, Mortality Review Coordinator, QMD, DDA
Robin Barnes, Management Analyst, PM, DDS
Corey Neils (Facilitator), Program Specialist, PAU, DDA

Handouts from the Meeting

- ❖ Agenda
- ❖ General Results of Re-Hospitalization Study
- ❖ National Core Indicators Data (2013 – 2016)

Review of September 5, 2017, Minutes

- ❖ No substantive changes made to the minutes.

❖ **General Results of Re-Hospitalization Study**

Matt Mason, GUCCHD, presented the results of the re-hospitalization study completed by Georgetown University. The study is based on a concern raised by Quality Trust that people receiving services from DDA are admitted to the hospital at a higher rate than non-disabled people. The study looked at 214 people receiving DDA services who experienced at least one of the 333 hospital admissions in an 18-month period. The study notes that this represents less than 10% of the people DDA serves. GUCCHD did not include data on emergency room or urgent care visits and focused on serious reportable hospital admissions only.

The review looked specifically at hospitalizations based on medical (somatic) concerns and not admissions for psychiatric or behavioral reasons. The most common diagnosis found was digestive issues (24% of admissions which includes gastrointestinal problems, bowel obstructions, and feeding tube dysfunction). The second was respiratory system problems (22%, pneumonia, breathing problems, and asthma), and lastly, circulatory system concerns (14%, stroke symptoms, cardiac problems and issues with blood pressure). The study also noted that information regarding the length of stay (which was three (3) days) for individuals was sometimes inaccurate or absent from MCIS. GUCCHD will continue to analyze the variables that may contribute to hospitalizations or re-hospitalization including the predictive "fit" of the Charlson Comorbidity Index, an analysis of behavioral health and psychiatric hospitalizations and a comparison to the general population to include demographic variables, and, admit and discharge diagnosis.





❖ **Introduction to National Core Indicator Data**

Robin Barnes, Management Analyst, DDS distributed and provided a quick overview of the National Core Indicator data for 2013-2016. The data provides comparative information for key areas (Day Services, Education, Health Care, Employment, Service Coordination transportation and other area and activities of daily life) and shows where the District stands compared to the national average in these areas. The committee discussed some of the areas and related findings, especially in those categories in which the District appears to be below the national average. The committee is encouraged to review the data and develop specific questions to discuss at the next QIC meeting. Erin Leverton and Charlotte Roberts are invited to assist in facilitating the conversation.

Announcements and Other Updates

- ❖ GUCCHD will be starting Trained Medication Employee – Train the Trainer 1-day refresher course for provider RNs. The class will be free and can take up to 30 participants. This class is for TME Trainers who require a 1-day refresher only. GUCCHD will add classes as necessary to meet demand. Trainers whose certification have to expire will require the 30-hour Board of Nursing Certification Course.
- ❖ GUCCHD will initiate a new study of the Behavior Support Plans (BSP) and the functions of the DDA Human Rights Committee. The study will examine the changes in BSP policy, formats, and the effectiveness of current plans.
- ❖ Daveena White, PCT Program Manager, was unable to attend this meeting. She will attend the next meeting to update the committee on DDA's PCT activities.

Next Meeting: Tuesday, November 7, 2017, at DDS.

