Avatar Process Improvement Meeting Agenda		
Meeting Date **Friday, 12/21/2018** **9:00-10:00 AM, 1400 Emeline, 2ⁿᵈ Floor, Conference Room 207**		

Meeting identity and mission	Inclusive, collaborative, focused, agenda driven, Continued Improvement Process to meet new state and federal requirements, improve client care and staff experience. This group gives us the opportunity to: Share both our voice and needs to impact policy, create and modify forms, reports and queries. Also requires our commitment to: bring information back to our respective groups, gather opinion and test current projects to ensure they meet our needs, as well as share the finalized recommendations back with the staff we represent.	

Agenda Items	Staff Area	Notes	
REMINDER: **How to get to UAT to test the work we do in this meeting**		- Ask for help from your help desk, who will guide you to create a shortcut pointing to: **https://santacruzuat.netsmartcloud.com**	When testing widgets, remember to "Reload Home View", so the new widgets are visible.
1) **CANS production form**	All Staff	Review Netsmart CANS form. Gather feedback whether we continue Santa Cruz version, or switch to production form.	Locate new form under "Child Assesment Needs and Strengths" This form includes the 50 initially required items by the state. We should review and consider if we recommend beginning using this form, recommend we continue to use the one created by Santa Cruz, or other options in between. Feedback needs to be sent to Stan Einhorn, Lauren Fein, Eli Chance with a copy to Cybele Lolley and Adriana Bare.
2) **Supervisor Compliance Report**	All Staff	Review recommended changes, report back results and staff feedback. Share first draft of report documentation	The report is running now, and it seems to be accurate with exception of a date change request. The group recommends to review each field one by one, document the conditions for the different formatting and source for the information, form and field information. Staff also shared concerns about the formatting when printing, accessibility to color printers and how some of the colors look in the gray shaded areas. Besides consideration for color-blind staff. Once formatting discussions are flushed out, staff recommend to include a color/shading key in the report's footer. • Psychosocial date is supposed to be green if: submitted initially within 30 days of admission, subsequently if 364 days from last submission. Requirements are not the same across all programs. Attached to minutes you will find a spreadsheet with RRG information that might be used for conditional formatting. Staff will review and bring back formatting recommendations. • Staff also requested to be able to run this report for one client. We also discussed keeping the "Last Assessment" widget and this report in synch.

			• MH Tx plan, Psychosocial, MSE, Dx forms need to display Submitted date for final form, and use this date to drive the formatting logic • Eliminate discharge column. • ALOC and SUD Tx plan: Has different timeline requirements based on modality. 30 days from admission for outpatient and IOT. 10 days for residential. days for Withdrawal Management. 28 days for NTP. The ongoing requirements is updates every 90 days for all modalities. For SUD plan, in the SUD columns we also need to LPHA signature date (routed date). • MH Short term tx plan also have different timelines. Staff will study RRG to investigate if building a criteria based on RRG will meet the need. • Staff wish to add to the report a group footer with client counts and a calculated % of compliance. QI will lead in depth discussions for report improvements in the month of January, as budget timelines pre-empt Adriana from facilitating this meeting.
3) **Report for note timeliness**	All Staff	Review recommended changes, report back results and staff feedback. Discuss switch from calendar to business days. Share first draft of report documentation	Some staff report not receiving any data when running this report. Please send an email to ITSupport@santacruzcounty.us describing the issues and parameters used, so the problems can be addressed.
4) **Current Caseload Report**	All Staff	Review change requests for the Current Caseload report, and other feedback from staff regarding this report. - Adding diagnosis date - Adding ALOC dates - Discuss removing some historical data	Not discussed
Future and Pending Agenda Items	➢ Report to evaluate compliance for age of notes and presence of Tx plans ➢ Episodic ALOC form: Subcommittee review Adolescent changes ➢ Next CSI Compliance Update 1/10/19 ➢ CANS 6-20, CANS 0-5, (ANSA on hold after data analysis from Praed) ➢ Supervisory report for progress notes aging and Treatment Plan coverage ➢ Episode Closings: Analyze and recommend workflows for closing episodes, including what tools are needed for support ➢ Network Adequacy follow up to additional items needed ➢ Pending notes report ➢ Discuss ROI in onset of services form, (ability to click on the boxes) ➢ New form for Medical History and Physical		
1) **Next Meeting**	Next meeting:		

	1/4/19 in Room **207**, 1400 Emeline 2nd Floor. Holiday break, no meeting until **Friday, January 11th**.
2) Attendees	Kathleen Alcala, Sarah Tisdale, Esther Orellana, David Chicoine, Cybele Lolley, Lynn Harrison, Eli Chance, Bill McCabe, Adriana Bare

Web Conference Call information: https://ocean-aacca.co.santa-cruz.ca.us/797781 **Meeting ID code is: 797781 Phone number for audio: (831)454-2222**