Quality Improvement Plan

For

9th JDC Adult Drug Court Treatment Program

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QUALITY IMPROVEMENT PLAN

9th JDC Adult Drug Court

Facility Name

Eddie Canterbury, LCSW

Facility Administrator
Mission Statement:

The 9th JDC Adult Drug Court’s mission is to closely supervise those who are suffering from substance use disorder, ensuring that they receive treatment, education, job skill training, etc. which will ultimately result in long-term sobriety, and the improvement of the quality of life, while providing for the public safety of the community.

Scope:

To achieve the goal of delivering high quality care, all employees are given the responsibility and authority to participate in the quality improvement program.
INTRODUCTION

Quality improvement is the structured organizational process for planning and executing a continuous flow of improvement which provides quality care that meets or exceeds expectations. The purpose of this quality improvement plan is to establish review procedures for the treatment program to ensure compliance with State laws and regulations, as well as to oversee important aspects of care for the substance dependent offender. The goal is to improve quality of services through a system of supervision, evaluation, and to promote continued training and education of professionals who work with substance dependent populations.
Quality Improvement Plan

Objectives:

1. To establish and maintain high standards for substance abuse treatment.

2. To develop a review process that is consistent and to provide a systematic approach for monitoring the quality, safety, appropriateness, and effectiveness of client care and services.

3. To provide support and education to practitioners to improve the safety of their practices.

4. To include all practitioners in quality improvement activities.

5. To recommend policy decisions with practitioners input.

6. To define quality indicators measurements, and goals.

7. To develop, implement, and monitor corrective action plans (CAPs).

8. Using collected data, and trends, implement improved strategies and ensure follow up as appropriate.

9. To strive for highest quality of care compared to state and national benchmarks.
Quality Activities Planned for 2013 objectives to achieve are:

- To develop an active Committee and Management team to ensure the necessary resources are made available
- To hold appropriate committee meeting throughout the year including: Quality Improvement/Utilization Management Peer Review, Clinical Practice guidelines/Best Practices, Compliance/Privacy Committee, and other ad hoc groups as needed
- To evaluate network adequacy and access to services
- To maintain qualified practitioners
- To monitor member satisfaction by responding and monitoring complaints and inquires
- To support client safety initiatives
- To provide Case Management Services as needed
- To collectively review quantitative data and major clinical adverse occurrence to identify problems
• To carefully prioritize identified problems and set goals for their resolution

• To address and evaluate utilization of services to ensure program is delivering services designed for targeted population
QUALITY OF CARE

Quality of care can be defined as the degree of which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge and can be divided into different dimensions according to the aspects of care being assessed.

Adequate quality assurance includes mechanisms that provide for regular case file audits, observation of groups, regular reports on offender progress, pre and post testing of offenders, formal and reassessments and client satisfaction.
Quality Improvement Committee

The Quality Improvement Committee consists of members of the Drug Court Treatment Team who are actively involved in client treatment, supervision, and evaluation. The committee members of the QI Plan are:

1. Program Director- Eddie Canterbury, LCSW
2. Assistant Director- Melissa McClain, LMSW
3. Senior Recovery Case Manager-Frank Virden, LAC
4. Quality Assurance Coordinator-Kenna Dixon, MS, CAC
5. Probation and Parole Officer-Justin Opdenhoff
6. Administrative Assistant-Tomyka Sanders

The QA Coordinator, Committee, and Clinical Staff will define goals, and specific objectives to be accomplished each year. These goals include training of clinical and administrative staff regarding both quality improvement principles and specific quality initiatives (s). Progress in meeting these goals and objectives is an important part of the annual evaluation of quality improvement activities.
Quality Improvement Plan

A. The Quality Improvement Plan shall identify clinically relevant quality indicators that are based upon professionally recognized standards of care.

This process shall include, but not limited to:

1. An annual self-evaluation. The review shall focus on the program of treatment services offered at the facility. This is not to be a review of individual practitioners.

2. Findings of other management activities, including but not limited to incident reviews, and reviews of staff training development and supervision needs.

3. Analysis of program/offender performance, and satisfaction

4. Evidence of implementation of program changes based on analysis.
Indicators as an Audit Tool for Quality Assurance

The scope of the Quality Improvement Plan focuses on quality care areas concerning the structure, process and outcome of the care given.

Important aspects of care identified for direct clinical practice includes but not limited to:

- Crisis Intervention
- Intake evaluation
- Admission and referral activities
- Psychosocial history
- Medical/psychological/psychiatric
- Individualized treatment plan
- Counseling services
- Drug screening urinalysis
- Progress notes
- Aftercare planning
Discharge summary

Important aspects of care identified for Support Services includes but is not limited to:

Health and safety procedures

Staff qualifications and skills

Resource acquisition

Client rights

Case management

Utilization review

Client satisfaction

Client case records
Indicators Utilized in Facility Audit

There is an individualized treatment plan

Individualized treatment plan developed within 72 hours of admission

Treatment plan reviewed at least every 90 days or sooner if client needs change

Progress notes reflect the recognition and implementation of the established treatment plan

Progress notes document all treatment rendered

Progress notes document client’s response to treatment, progress or lack of progress towards treatment goals

Progress notes reflect chronological documentation of clinical/laboratory assessments/test/results

Progress notes are dated and signed by individual making the entry

Notice of privacy practices given to client

Waiver of confidentiality signed and in case record

Diagnosis on treatment plan
Client’s rights explained and documentation signed by client

Client contract signed by participant and intake person

Timeframe for each goal on the treatment plan

Physical/psychiatric needs identified and addressed in treatment plan

Treatment plan updated if necessary

Treatment plan addresses problems identified during assessment

Treatment plan signed by client

Recommendation for follow-up and aftercare

Referral to self-help groups documented
Indicators Utilized/ Add-on
Quality Improvement Initiative

The purpose of an initiative is to improve the performance of existing services or to design new ones. The model utilized at 9th JDC Adult Drug Court is Plan-Do-Check-Act (PDCA).

PLAN

Identify opportunities for improvement. The focus is to analyze data to identify concerns and determine anticipated outcomes.

DO

This step involves using the proposed solution and if it proves successful, as determined through measuring and assessing, implement the solution usually on a trial basis as a new part of the process.

CHECK

During this stage, data is collected to compare the new process with those of the previous one.
ACT

This stage involves making the changes a routine part of targeted activity. Acting also means to involve staff, clients, or any individual members affected by changes implemented.
References:


QUALITY ASSURANCE DATA COLLECTION FORM

DATE: _____ FACILITY/PROGRAM: __DRUG COURT_____

QUALITY ASSURANCE REVIEWER: ________________________

ASPECT OF CARE: ____________________________

INDICATOR NUMBER: ______

TOTALS

# OF CASES REVIEWED ________________

# MET ___________; # NOT MET ________________

THRESHOLD ____________________________

PERCENTAGE __________________________

RECOMMENDATIONS:

FURTHER INFORMATION/FURTHER REVIEW/ACTION __________________________

NO FURTHER REVIEW _________________

COMMENTS:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Client Satisfaction Survey

The purpose of this survey is to obtain information from you regarding the effectiveness of our treatment program and services provided. Your answers will be used to improve any or all services to help increase your chances for successful outcomes in treatment.

DATE: ______________________

Please check the box that describes your views and how well we delivered services to you.

1. During your admission process was there enough time allowed for your interview and was your interview held in a private area?
   - Very Good [ ]
   - Fair [ ]
   - Poor [ ]

2. Were you treated courteously and with respect by staff members?
   - Very Good [ ]
   - Fair [ ]
   - Poor [ ]

3. At admission were you given the rules and regulations for the program and were they explained?
   - Very Good [ ]
   - Fair [ ]
   - Poor [ ]

4. Did you receive information informing you of your rights and privileges as a client at this facility?
   - Very Good [ ]
   - Fair [ ]
   - Poor [ ]

5. Were your basic rights denied while a client here?
   - Very Good [ ]
   - Fair [ ]
   - Poor [ ]

6. How do you rate the treatment provided to you?
   - Very Good [ ]
   - Fair [ ]
   - Poor [ ]
7. Do you feel that Case management services assisted you to make contact with other agencies in the community to help meet your needs?

Very Good   Fair   Poor
[ ]       [ ]       [ ]

8. Was your counselor easy to talk to?

Very Good   Fair   Poor
[ ]       [ ]       [ ]

9. Would you recommend this program to other people in need of drug/alcohol treatment?

Very Good   Fair   Poor
[ ]       [ ]       [ ]

10. How was your overall experience with the Drug Court program?

Very Good   Fair   Poor
[ ]       [ ]       [ ]

Your comments are very important to the Agency. Please write how you feel to help us improve services, and better assist you with succeeding in the treatment program. Thank You!

Comments:__________________________________________________________
__________________________________________________________
__________________________________________________________
__________________________________________________________
__________________________________________________________

Your name would be helpful for future reference however, **You Do Not** have to include your name

Name:____________________________________________________

Address:____________________________________________________

Phone#:____________________________________________________