

# CAP COMPLIANCE COMMITTEE AGENDA AND MINUTES

Location: Zoom

Date: 2/8/2023 @ 2:30-4:00

Attendance: Kelli M, Fairleigh B, Kim W, Emile H, Kim W, Denise D, Tamara C, Jerry C, Rachael G

Facilitator: Shayna Sokol

## Agenda Items

### Agency Compliance Updates

Agency 1: Agency is currently completing an FWA audit for Psych Rehab. This is a desk audit and the agency will provide read only with a restricted caseload. Informed that they'd need access for about a month. Feedback in a recent audit related to client signatures on DA treatment plans. Two agencies on the committee consulted and realized that they received competing sets of feedback from their auditors related to regulatory requirements for tx plan signatures. Chair will ensure that this is noted with the problematic regulations' workgroup.

Agency 2: Agency completed a DDAP audit recently, citations related to treatment planning and some feedback on caseload sizes and available treatment hours for DA patients. Agency informed auditors that the formula has presented challenges to meet the standard and asked for support from the auditor as to how to accommodate the standard. DDAP auditor was unable to provide feedback related to how to accommodate the regulation. Agency is currently completing two FWA self-reports.

Agency 3: OMHSAS BSC audit in December. Issued a full license for the year. DDAP visit in January, positive feedback, no citations. County DA/Impact visit scheduled, SAP audit pending. Agency is completing a self-reported to CCBH related to an FWA concern.

Agency 4: County fiscal audit and residential licensing, no identified deficiencies.

Agency 5: All recently audit activity was successful, no issues identified or citations.

Agency 6: Agency is working on encounter verification process in ECR to resolve process issues and concerns by creating a workflow and verification reporting process. Rolling out new chart audit tools. Recent IDD licensure visit resulted in several citations and licensure feedback related to prn medications and physician instructions related to use for pain and the absence of clear direction as to the type of pain. Agency indicates that this is the first time that they've receive this feedback.

Agency 7: Agency reports that all audits have been going well. No recent quality reviews, but OPT is being scheduled.



**MD signatures on Treatment Plans:**

Compliance group discussed the challenges related to obtaining recipient signatures on MD treatment plans. Agencies offered support related to internal processes for obtaining these signatures, including using a nursing and/or administrative support resource. Agencies collectively noted challenges related to MD related compliance issues and the necessity to employ additional resources to obtain needed signatures.

**Share a Policy/Practice:  
Internal QA/QI Processes**

Agencies will share their internal tools for QA/QI and processes will be reviewed in the April meeting. Shayna will demo WFS' process for CRRs, including database and reporting of results.

**Telehealth**

Agencies reporting that they are all moving toward compliance With the standards in the bulletin and provider alerts.

Compliance Communications  
for Review

<https://providers.ccbh.com/uploads/files/Provider-Alerts/202302-omhsas-bulletin-suspension-continuation.pdf>

<https://providers.ccbh.com/uploads/files/Provider-Alerts/202212-alert18-restraint-tracking.pdf>

<https://s18637.pcdn.co/wp-content/uploads/sites/9/ValueAdded-Newsletter-November-2022.pdf>

Next Meeting

<https://us06web.zoom.us/j/87971408668?pwd=RGIDZXc1V1NMSm5ZMmFOTWR4MEZodz09>

Meetings held the 2<sup>nd</sup> Thursday of even months, from 2:30-4:00 via Zoom

### Additional information

Add additional instructions or comments here.