

# ACCR Committee Minutes Form

Date: 9/14/07

Name of Committee: **Quality Management**

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Co-Chair(s): **Wes Sowers, Diann Ferrick (on leave)**

Note taker: **WES**

Attendees: **Wes Sowers, Victoria Livingstone, Ellie Medved, Sarah Goldstein, Meg Park, Regina, Bill Boyne**

## Minutes

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Agenda Item: **Focus Groups for Service Planning Document**

Committee Goal Being Addressed: **Obtain Additional Input on Document**

Discussion:

1. **Additional Focus Groups-** Meg reported on focus group that she completed at People's Oakland at our last meeting and circulated a report on that encounter today. She will conduct another focus group at Residential Care Services in the coming week.

Persons responsible: **All**

Target Date: **10/15/07**

2. **Revision of Principles-** One idea that has emerged pretty consistently in the focus groups is that the language is too difficult and requires that a person be fairly sophisticated to grasp them easily. We agreed to translate the principles into simpler language so that they can be accessed by a greater number of people. This could either become a replacement of the current language in the document or an alternative presentation of the principles. A work group was established to begin that process.

Persons Responsible: **Meg, Bill, Regina, Sarah** Target Date:**1/10/08**

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Agenda Item: **Universal Service Plan Development**

Goal Being Addressed: **Uniform Person Centered and Directed Planning Processes**

Discussion:

**This meeting we reviewed work to date and discussed how to proceed from this point. The elements that have been identified are as follows:**

- **Demographic Information**
- **Narrative Description of Situation**
- **Overall Goal/Vision/Expectation of Participant**
- **Strengths and Abilities**
- **Domains or Areas of Focus**
- **Specific long term goals for each active domain**
- **Short term or “transition” goal for each active domain (what would allow graduation to less intensive services?)**
- **Applicable strengths for the domain**
- **Identified “change” issues (things the person would like to change)**
- **Objective/outcome/desire for each identified change issue (quantifiable)**
- **Indicators/measures for each Objective (quantified)**
- **Intervention/method for achieving each Objective**
- **Persons responsible for assisting**

**Everyone agreed that the process should be simple and that there should be a single point of accountability.**

**We began to work through the following list of tasks.**

**Action Items:**

- **Determine Terminology to be used**
- **Scope of Demographic Information and Narrative**
- **Determine Domains**
- **Determine Use of Menus and Prompts in addition to “own” language**
- **Layout of Plan**
- **Electronic v. Paper Versions.**

**There was some further discussion about how WRAP or other personal recovery plans should be incorporated into the Service plan. After some extended consideration of this issue, we reached consensus that it should be attached to the plan and various elements of it could be woven into the domains as appropriate.**

**The group also discussed the extent of demographic information that would be required on the service plan itself, and there was agreement that Name, Date of Birth and Social Security Number should be sufficient to connect the plan with other parts of the medical record.**

**The discussion of the narrative was somewhat more controversial. There was fairly strong sentiment to exclude any terminology that could be construed as**

**derogatory or implying weakness. We did reach general agreement that the narrative should provide a context for the plan and provide a description of the person's current situation and circumstances. We will consider whether there should be some structure to insure that some description is provided in each domain once we have them established.**

**We will begin to discuss the domains and terminology at the next meeting. Providers and Consumers are encouraged to review compatibility with the process that their respective agencies use.**

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**We reported briefly on the Single Point of Accountability Plan and Recommendations that was presented at the BH Providers meeting earlier in the morning. One of the recommendations was for a universal plan and our group has been designated to take the lead on this aspect of the plan.**

**The next meeting of the Quality Committee will be on October 19<sup>th</sup> at 12:00 PM at Community Care.**