

Harmonia Collaborative Care, Inc.
Quality Assurance Committee
Minutes
Zoom Conference, Wednesday January 26th, 2022

Present:

Staff: Megan Brautlacht, LMHC; Jordan Alston, MHC-P; Marissa Biondolillo, MSW; Rachael Dudczak, LMHC; Elizabeth Franklin, MHC-P; Cherie Ruben, Ph.D; OStevens, LCSW; Amy Szyszkowski, LMHC; Rachael Ruppert, PMHNP-BC; Lena Rocco, PMHNP-BC; Tiana Andrews SW Intern; Li Ting Lin, Psychology Extern; Nathalie Velasco, Psychology Extern

Board Member: Christine Kluckhohn

1. Untoward Incidents.

a. New Incidents: There were nine new incidents in the 4th quarter of 2021, these incidents were entered into NIMRS.

Incident was reviewed on November 11, 2021.

i. Client: REMOVED

DOB: REMOVED (age: 43)

Type of Incident: Suicide Attempt, Harm/Risk Level 1 **Date of Incident:** 10/26/2021

Diagnosis: Major Depressive Disorder, Moderate, Recurrent; Generalized Anxiety Disorder

Medications: Hyrdoxyzine 25mg, 2 tab, QD – OTC

Admission: 10/13/21

At-Risk List: Yes

Service Providers: Li Ting (Ada) Lin, Psychology Extern; Rachael Ruppert, PMHNP

Background: REMOVED

Incident: Client had a therapy session on 10/26/21 during which she reported attempting suicide over the weekend. Client's speech was incoherent and tangential. Therapist began communications with crisis services on 10/26/21 after session and client was admitted to BryLin 10/26/21 evening. Primary therapist's supervisor spoke with client's fiancé on 10/28/21 who reported client stated she tried to hang herself two times in their basement using house pipes and a cotton bathrobe tie. Client's fiancé reported he found client "sitting on the floor trying to hide the materials," therefore he is unsure how long she may have attempted. No calls to 911 or crisis services were made by the family due to "not recognizing the severity of the situation at the time."

MD Recommendations: Client's significant level of symptoms and suicide risk were recognized by the treatment team and she was admitted to the hospital. This was an appropriate intervention. She was not considered a high suicide risk prior to her recent presentation to the session. Her family did not recognize the severity of her symptoms as she has attempting to disguise how severe her symptoms were. The mental health care was appropriate. PMargulis MD 11/9/21

Recommendations: Post-discharge from BryLin, Client reported that she was "not totally honest" with the BryLin staff, as other patients "warned her" of their poor treatment and being over medicated by the staff. Harmonia staff feel the client would have benefited from longer hospitalization if she had been honest about suicidal thoughts with BryLin staff. Client was referred to a higher level of care, ECMC's PHP or Best Self's PROS program, and the Client chose to transfer services to PROS with her initial appointment reportedly being 11/10.

Incident was reviewed on November 11, 2021.

ii. Client: REMOVED

DOB: REMOVED (age: 58)

Type of Incident: Death, Natural Causes, Unexpected

Date of Incident: 10/16/2021

Diagnosis: Adjustment Disorder, with Depressed Mood

Medications: Ramipril 2.5mg QD, Metformin 850mg BID, Insulin injections – prescribed by non-HCC provider

Admission: 03/18/19

At-Risk List: No

Service Providers: Tammy Lyn Davis, LMHC, PhD

Background: REMOVED

Incident: Primary therapist called client for scheduled telephonic therapy appointment on 10/28/21, client's friend/roommate answered the phone and reported the client had died at home on 10/16/21. The friend/roommate stated that the cause is suspected to be diabetes, which the client had been actively working to better manage since diagnosed in 2012. No autopsy is being done.

MD Recommendations: This client had significant medical issues including diabetes, hypertension and a systemic infection that required a lengthy hospitalization. Cause of death appeared to be related to significant medical issues and was not related to mental health issues or mental health treatment. PMargulis MD 11/9/21

Recommendations: None.

Incident was reviewed on November 11, 2021.

iii. Client: REMOVED

DOB: REMOVED (age: 68)

Type of Incident: Death, Natural Causes, Expected

Date of Incident: 10/24/2021

Diagnosis: Adjustment Disorder, with Mixed Anxiety and Depressed Mood

Medications: Methadone 2.5 mg BID, Oxycodone 5mg PRN, Omeprazole 20mg QD – prescribed by non-HCC provider

Admission: 04/01/20

At-Risk List: No

Service Providers: Madeline Ryan, MHC-P

Background: REMOVED

Incident: Primary therapist was informed by a community member that client had died. Obituary was found online, which noted client died at home on 10/24/21 from long-time battle with lung cancer.

MD Recommendations: Patient passed away from long battle with lung cancer. Death was expected and was not related to mental health symptoms or mental health treatment. PMargulis MD 11/9/21

Recommendations: None. Primary therapist spoke with Client's partner, confirmed she died at home due to cancer.

Incident was reviewed on November 11, 2021.

iv. Client: REMOVED

DOB: REMOVED (age: 24)

Type of Incident: Suicide Attempt, Harm/Risk Level 2

Date of Incident: 10/24/2021

Diagnosis: Depression NOS, Anxiety Disorder NOS

Medications: Lamotrigine 150mg, 2 tab, BID; Lamotrigine 25mg tab QD; Ethosuximide 250mg cap QD; Clobazam 10mg, 1.5 tab, BID; Methimazole 5mg tab QD; Cetirizine 10mg tab QD – prescribed by non-HCC provider

Intake: 09/30/21, not yet admitted

At-Risk List: Yes

Service Providers: Elizabeth Franklin, MHC-P

Background: REMOVED

Incident: Client appeared for her third scheduled appointment on 11/4/21 at 1pm and admitted to self-harming with a box cutter earlier that day. Client reported she was triggered by a conversation with her ex-boyfriend about them getting back together. Client stated she had a panic attack and when her ex-boyfriend stepped out of the room, she cut her arm multiple times and "went a little too deep" on the last cut. Stated she told her ex-boyfriend what she did, and they went to Urgent Care, where client received 2 stitches. The hospital encouraged client to attend her appointment at Harmonia later that day. An updated safety plan was created during 11/4/21 appointment, and client will be seen weekly until further notice. Client was also encouraged to utilize Crisis Services (number was provided to Client) or call 911 in case of an emergency.

MD Recommendations: Patient had expressed only fleeting suicidal ideation without a plan prior to her impulsive suicide gesture. It appeared that this gesture was spontaneously triggered by a conversation with her ex-boyfriend. The risk has been appropriately reassessed, a safety plan has been put in place and visit frequency has been increased to weekly. Mental health care is appropriate and suicide risk assessment has been appropriate. PMargulis MD 11/9/21

Recommendations: Nothing further than noted above.

Incident was reviewed on December 15, 2021.

v. Client: REMOVED

DOB: REMOVED (age: 30)

Type of Incident: Death, Natural Causes, Unexpected

Date of Incident: 11/26/21

Diagnosis: Generalized Anxiety Disorder, Posttraumatic Stress Disorder

Medications: Buspirone 10mg QD – prescribed by PCP Debra Longbine

Admission: 08/16/19

At-Risk List: No

Service Providers: Jordan Alston, MHC-P

Background: REMOVED

Incident: Client's therapist called for scheduled telehealth session on 12/02/21, client's husband answered the phone and reported client died unexpectedly on 11/26/21 at home due to complications from pneumonia and COVID-19.

MD Recommendations: Unexpected and very tragic passing unrelated to her Mental Health Treatment. Mental Health Treatment was appropriate and thorough. PMargulis MD 12/15/21

Recommendations: None.

Incident was reviewed on December 15, 2021.

vi. Client: REMOVED

DOB: REMOVED (age: 56)

Type of Incident: Death, Natural Causes, Unexpected

Date of Incident: 11/27/21

Diagnosis: Major Depressive Disorder, Generalized Anxiety Disorder, Panic Disorder, Posttraumatic Stress Disorder

Medications: Cymbalta 60mg tab QAM, Wellbutrin 300mg tab QAM, Abilify 10mg tab QD, Lamictal 150mg tab QHS – prescribed by Cynthia Miller; Pregabalin 75mg, Oxycodone 20mg, Methadone 10mg – prescribed by non-HCC provider, Dr. Pawlowski

Admission: 06/13/18

At-Risk List: No

Service Providers: Jamie Winkelman, LMHC; Cynthia Miller, PMHNP; Melissa Bergquist, PsyD Post Doc

Background: REMOVED

Incident: Client had cancelled last appointment and had not yet called the clinic to reschedule. On 12/08/21, another client of Harmonia reported to their clinician that this client had passed away from kidney, liver, and brain damage that caused a heart attack. Obituary was obtained that

confirmed client died on 11/27/21. Client did not provide emergency contact or consent to speak with any family members.

MD Recommendations: Unexpected and very tragic passing unrelated to her Mental Health Treatment. Mental Health Treatment was appropriate and thorough. Patient had significant Medical Conditions that caused a fatal heart attack. *PMargulis MD 12/15/21*

Recommendations: None.

Incident was reviewed on December 15, 2021.

vii. Client: REMOVED

DOB: REMOVED (age: 29)

Type of Incident: Suicide Attempt, Harm/Risk Level 1

Date of Incident: 11/30/21

Diagnosis: Personality Disorder, Unspecified; Intellectual Disability, Mild; Anxiety Disorder NOS

Medications: Aripiprazole 20mg tab QD, Famotidine 40mg tab QD, Hydroxyzine HCL 25mg tab QD, Junel FE 24 1mg-20mcg tab QD, Lisinopril 10mg tab QD, Omeprazole 40mg cap QD, Sertraline 100mg 2 tab QD, Sucralfate 1g tab QD, Vitamin B-12 100mcg tab QD, Vitamin D3 50 mcg QD, Artificial Tears 1 drop both eyes BID, Symbicort Inhaler 2 puffs BID – prescribed by non-HCC providers.

Admission: 11/23/21

At-Risk List: Yes

Service Providers: Jessica Grobe, PsyD Post Doc

Background: REMOVED

Incident: During 12/07/2021 telehealth therapy session, client reported a CPEP visit on 11/30/2021 due to ingesting hand sanitizer. Client initially denied ingesting hand sanitizer, then stated, "I don't know" and "I don't remember." Discharge paperwork from CPEP reported client stated "I wanted to drink a bottle of hand sanitizer because I was mad at my grandma. She disowns me. I called her and she hung up on me. I was triggered;" reported she impulsively drank some amount of hand sanitizer. Client reported to CPEP she ingested "half a bottle" but can't provide any other details regarding amount. Therapist and client completed lethality assessment and safety plan during 12/07/21 appointment, safety plan shared with client's residential staff.

MD Recommendations: This Patient presented with a known and thoroughly assessed risk of self-harming behaviors and extremely high utilization of services. Patient was appropriately assessed for suicidal ideation which at the time of the visit. It appears that this Patient has chronic suicidal ideation and risk appears to have been assessed properly. The suicide attempt by hand sanitizer ingestion was made 1 week prior to the recent visit. Appropriate lethality assessment and safety planning were completed during 12/7 visit. The only minor recommendation I would add, is since it appears that perceived abandonment may be what often triggers this patient to act impulsively, perceived abandonment should always be asked about and documented in sessions. *PMargulis MD 12/15/21*

Recommendations: Nothing further than noted above.

viii. Client: REMOVED

DOB: REMOVED (age: 54)

Type of Incident: Client Death, Unexplained

Date of Incident: 01/12/22

Diagnosis: Generalized Anxiety Disorder; Major Depressive Disorder, recurrent, unspecified

Medications: Zoloft 50mg tab daily; Klonopin 0.5mg tab BID PRN

Admission: 12/01/20

At-Risk List: No

Service Providers: Melissa Bergquist, PsyD Post Doc, Rachael Ruppert, PMHNP

Background: REMOVED

Incident: Front office staff member received call from the client's mother stating the client had died. The mother stated the client had not responded to contact attempts in 24 hours, therefore a cousin went to the home and found her unresponsive. The officer on scene was not able to discern if substances were involved. Client is being examined at ECMC for cause of death.

MD Recommendations: Patient was not suicidal and had been appropriately evaluated and treated. The Patient denied substance use. The patient appeared to be future oriented. The cause of death for this patient is not yet known. The overall mental health treatment appears to have been appropriate and the untimely passing did not appear to be related to treatment. *PMargulis MD 1/25/22*

Recommendations: None.

ix. Client: REMOVED

DOB: REMOVED (age: 30)

Type of Incident: Death, Natural Causes, Unexpected

Date of Incident: 01/11/2022.

Diagnosis: Major Depressive Disorder; Generalized Anxiety Disorder; Attention Deficit/Hyperactivity Disorder, Unspecified

Medications: Adderall 20mg TID, Klonopin 1mg BID, prescribed by Harmonia. Atorvastatin, Baclofen, and Vascepa prescribed by PCP.

Admission: 08/21/14

At-Risk List: No

Service Providers: Cherie Ruben, PhD; Rachael Ruppert, PMHNP

Background: REMOVED

Incident: Client's primary therapist received HealtheLink alert on 1/12/2022 that client was in Mercy Hospital due to cardiac arrest, did not indicate that client had expired. Client had a history of cardiovascular accidents and heart attacks. Therapist made several attempts to contact client by phone, left voicemails and calls were not returned. Therapist found client's obituary online, cardiac arrest was fatal on 1/11/2022.

MD Recommendations: Patient had significant underlying medical conditions which were the cause of passing. The patient had a significant history of cardiovascular disease. The untimely passing was not related to mental health symptoms or treatment *PMargulis MD 1/25/22*

Recommendations: None.

b. Old Incidents: None to review.

2. Child Abuse Reports: There were no child abuse reports made in the 4th quarter.

3. Clozaril Patient Care: Four clients are following the protocol without complication. They have been assigned an "at-risk" category within ECR to ensure procedures are followed and monitored regularly.

4. Suboxone Program: The current opioid epidemic and concerns in HCC's service area is being addressed. Rachael Ruppert, PMHNP is trained and certified to prescribe Suboxone, awaiting prescribing number. Lena Rocco, PMHNP is currently working towards attaining the waiver. The clinic is accepting referrals limited to established clients of HCC who are currently in another Suboxone program. These clients must appear on-site, abide by signed program agreement, and submit toxicology screenings. On-site Narcan training is being provided to all staff in February.

5. Client Satisfaction/Testimonials: There have been no changes to Harmonia's online google reviews since last report. Client satisfaction surveys are being filled out in-person by clients after

their initial appointment; average ratings are “Excellent” and “Good” at this time. Harmonia is exploring a tablet-based digital questionnaire that would be available in the waiting rooms and possibly by QR code, to overcome pandemic barriers to obtaining client reports.

6. Client Grievance: There were no grievances filed during this quarter.

7. Safety: No report.

8. Quality Improvement – Clinic Wait Times

a) Initial Appointment Wait Time: 10/01/2021 – 12/31/2021

Days to appt	# of clients	% of client
0-3	8	6%
4-10	30	22%
10-30	87	64%
>30	11	8%

Majority of initial appointments continue to be had within 10-30 days. There was a decrease in number of appointments given in greater than 30 days from 19% to 8%.

b) Average of Days to Intake: 10/01/2021 – 12/31/2021

Location	Derby	Hamburg	Grand Total
Average DaysToIntake	15	16	16

The total average days to intake decreased from 21 to 16.

c) No Show Rate: 10/01/2021 – 12/31/2021

Visit Type	Derby	Hamburg	Total
Checked In	2875	1923	4798
No Show	323	270	593
No Show Rate	10%	12%	11%

Overall No Show Rate decreased from 13% to 11%.

d) Referrals, Treatment Sessions, People Served

		Mental Health Clinic			
Referrals		<i>Dec-21</i>	<i>2021 YTD</i>	<i>2020 YTD</i>	<i>Variance</i>
	Derby	39	422	452	-7%
	Hamburg	38	455	270	69%
	Total	77	877	722	21%
Treatment Sessions					
	Derby	952	11,731	11,093	6%
	Hamburg	620	6,274	4,130	52%
	Total	1,572	18,005	15,223	18%
People Served					
	Derby	626	973	1013	-4%
	Hamburg	365	667	408	63%
	Total	991	1,640	1,421	15%

In 2021, there was a 21% increase in referrals, 18% increase in sessions, and 15% increase in people served compared to 2020.

Action Plan: Agency is exploring physical move to accommodate continued growth in response to community needs. Hiring plans for 2022 include a Derby Clinic Coordinator, 2 FT Derby Clinicians, and 1 FT Hamburg Clinician. Harmonia intends to continue hosting interns and externs. Telehealth services are permanent, which allow for shared office space and decrease in barriers to access for clients.

9. PSYCKES – CQI – Overdose Prevention Project: Harmonia participates in PSYCKES CQI initiatives to foster data driven quality improvement and clinical decision making; improve the safety, efficiency, and quality of care; promote best practices; and help clinics build readiness for participation in evolving public health environment. Participation also results in an added percentage to Medicaid reimbursements.

Tracey Miers, Hamburg Clinic Coordinator, is QIC Lead for Overdose Prevention CQI Project.

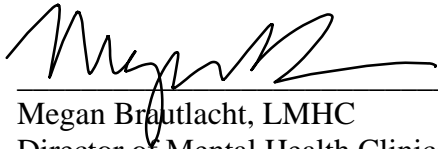
Project Elements and Progress:

- Screening – new screening tool added, RODS.
- Assessment and Referral – continuing relationship with local CD clinic, TLC.
- Naloxone & Overdose Prevention Education – exploring availability via telehealth.
- Buprenorphine Waiver Training – Lena is currently working towards certification.
- MAT (Medication Assisted Treatment) Implementation – Rachael is trained and certified to prescribe Suboxone, awaiting prescribing number.
- COD/ODU Training for Therapists – exploring internal training opportunities.

10. Value Network Connect: Harmonia is partner in Value Network, a behavioral health care collaborative. Through VN, Harmonia participates in value-based payment contracts with Highmark BlueCross BlueShield of Western New York and Monroe-Molina.

Harmonia received \$10,000 in 2021 from VN due to participation in the collaborative and producing quality client metrics.

Tracey Miers, Hamburg Clinic Coordinator, is taking over management of PDSA cycles to improve AMM (Antidepressant Medication Management) and IET (Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment) metrics.

A handwritten signature in black ink, appearing to read 'Megan Brautlacht', written over a horizontal line.

Megan Brautlacht, LMHC
Director of Mental Health Clinics