Quality Assurance Meeting Minutes
Date: Quarter:

ATTENDEES

NAME	TITLE
John Doe	*Owner*
Jane Doe	*Administrator*
John Smith	*Director of Patient Services*
Jane Smith	*HR Director*
Jim Johnson	*Consumer Representative*

- Administrator called meeting to order at 11:00am.
- Quality Assurance meeting committee reviewed previous meeting minutes and discussed the following:

PATIENT COMPLAINTS	- Complaint log binder was circulated, reviewed and updated. - One complaint noted from patient JJ regarding HHA lateness. - - As per patient JJ, his assigned aide is continuously late and leaves before assigned departure time everyday. Administrator investigated claim and reviewed aide timesheets and called in aide for in-person meeting. Aide admitted to lateness claims and was given a verbal warning. Aide was in-services on the importance of lateness and alerting the agency of any schedule changes. Aide was re-assigned to a different case. - Patient JJ chart reviewed by DPS during quarterly audit (see audit tool attached). - HHA chart along with timesheets reviewed. - DPS noted discrepancies with timesheet and aide assignment. -- - DPS will begin corrective action and will update assignment times in the chart.
NEW CASES	- QA committee discussed 7 new cases for the quarter. - HHA assigned for all cases on time. RN assessment and supervision complete for all new cases. - New cases added to RN schedule, re-assessment to be conducted in 6 months.

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NEW STAFF	- QA committee discussed 3 new HHAs hired this quarter. - New aides all in-serviced and placed on cases in Brooklyn. - DPS confirmed that RN supervision completed for all new cases and all new cases were added to RN schedule. - Re-assessment and supervision to be conducted in 6 months. -President explained the need for additional aides for patient placement. DPS explained a plan to communicate with HHA training schools to recruit new graduated aides. President agreed with outreach plan. DPS will begin recruitment during the week of 4/1/20.
POLICY AND PROCEDURE CHANGES	The policy and procedure manual was reviewed and updated on 2/23/2020. The following policies were updated in the policy and procedure (PP) manual: -Emergency Policy -Influenza Policy -Coronavirus policy added to the PP manual -Changes to policy and procedure forwarded to the Governing Board for review and approval during their next annual meeting scheduled for 3/1/2020. Anticipation of DOH visit soon, Administrator to review HCS for any policy or regulation requirement changes and will report any new changes during next quarterly meeting. President requested that new changes be recorded and circulated via email before next quarterly meeting. Administrator agreed and will follow up accordingly.
CLINICAL RECORD REVIEWS	- 10% of clinical record reviews completed for patients (see attached audit tool for additional details). - Results indicate missing health assessments and supervisions in 2% of the charts. - RN supervisor confirmed assessments and supervision scheduled for this week. - Missing assessments will be obtained by 4/1/2020.
PERSONNEL RECORD REVIEWS	- 10% of personnel record reviews completed for HHAs (see attached audit tool for additional details). - Results indicate missing Influenza vaccination/declination 3% of the charts. - HR Director confirmed declination forms have been obtained

	and will be filed in charts by the ending of this business day (3/1/2020).
DISCHARGES WITHIN THREE MONTHS	- No current discharges at this time. - Committee reviewed discharge procedures including review of 48 hour MD notification alert.
ROSTER REVIEWS	- Committee updated all rosters including: - emergency patient rosters (new patients added) - staff call-down list (new employees added) - community partners list (local hospital number added) - employee list (new employees added)
OTHER:	- DOH visited [insert agency name here] on February 20, 2020. - - Surveyors pointed out deficient practice in charts and policy and procedure manual. Policy and procedure manual has been updated accordingly. Revisions to be submitted to the governing board for approval.