Joint Conference Committee (JCC) Regulatory Affairs Status Report: **December 2015**

I. PENDING SURVEYS

- A. Triennial Hemodialysis (Fire, Life and Safety) Survey (Ward 17).
- B. The Joint Commission 2015 Disease-Specific Certification (DSC) Survey: Stroke & Traumatic Brain Injury (TBI) Program.
- C. CDPH Long Term Care Survey December 2015
- D. CDPH Building 25 Licensing Survey February 22 -26, 2016

II. COMPLETED SURVEYS

No surveys completed during this time period

III. PLANS OF CORRECTIONS: Reports & Updates

A. Commission on Accreditation Rehabilitation Survey (CARF) - Action Plan due March 3, 2016

Action Items :	Update(s):	Target Completion Date:
 Screening and Access to Services: The process of screening and assessment is designed to determine a person's eligibility for services and the organizations ability to provide those services. Each person served is actively involved in, and has a significant role in, the assessment process. Finding: It is recommended that each person served receive an orientation that is provided in a timely and consistent manner based on each person's presenting condition and type of services provided. 	• OTOP leadership has implemented a new comprehensive orientation process for new clients accepted to the program. This orientation process now includes a requirement that all the elements of the orientation process are documented in the client's case note (Methasoft) in addition to the current patient handbook and orientation process.	Anticpated date of completion February 19,2016.(responsible person(s)) Kathy Ballou MS RN Director Nursing , OTOP

2.	Rights of Persons Served: <i>CARF- accredited</i> <i>organizations protect and promote the rights of all</i> <i>persons served. This commitment guides the delivery of</i> <i>services and on-going interactions with persons served.</i> Finding: Program Bill of Rights Policy needs to be updated to include specific language regarding the patient's right to refusal or expression of choice related to refusal of care, concurrent services, and composition of delivery team.	 OTOP Patient Bill of Rights policy currently being reviewed/ revised to include specific language regarding the patient's right to refusal or expression of choice concerning the following: refusal of care, concurrent services, and composition of delivery team. 	Anticpated date of completion February 19,2016. (responsible person(s)) Kathy Ballou MS RN Director Nursing , OTOP
3.	Supervision of counselling staff: Finding: Documentation by all clinical supervisors needs to be consistent and standardized.	 Review and revise current policy to add language that outlines specific documentation requirements for clinical documentation. Revise clinical supervision progress notes to include comments section. Clinical supervisors will have each of the program counsellors present two cases per month to ensure the accuracy and consistency of written program plans for persons served by the program. 	Anticpated date of completion February 19,2016. (responsible person(s)) Kathy Ballou MS RN Director Nursing , OTOP
4.	Transition and Discharge : The transition plan is a document the person served uses to identify the support that is needed to prevent a recurrence of symptoms or reduction in functioning. It is expected the person served receives a copy of the transition plan. Finding: The discharge summary needs to include information about medication(s) prescribed or administered when applicable.	 OTOP program Medical Director and Clinical Manager meeting with IT department to discuss creating/implementing an electronic discharge summary in Methasoft software program currently being utilized by the OTOP program. Revise current discharge summary forms to include a discharge medication section. 	Anticpated date of completion February 19,2016. (responsible person(s)) Kathy Ballou MS RN Director Nursing , OTOP