External Program Review Committee (EPRC) minutes

Date of meeting: March 5, 2020
DSD liaison: Stacie Enders, Linda Wolford, Ariana Dionisopoulos and Charles Young
Type: Whole committee
Location: Elmer L. Andersen Human Services Building, Room 2130, 540 Cedar St., St. Paul 55101. Most members of the committee, however, participated through an online video conference line.

Attendees: Dan Baker, Stephanie Schaefer, Danielle Bishop, Kim Frost, Laura Daire, Lindsay Nash, Liz Harri, Mary Piggott, Melanie Eidsmoe, Mike Boston and Stacy Danov
Not present: Jodi Greenstein, Barbara White and Tatiana Kerestesh

Agenda items

Vote

Those in favor of approving the February 2020 meeting minutes:

- Dan Baker: yes
- Mary Piggott: yes
- Stacy Danov: yes
- Liz Harri: yes
- Stephanie Schaefer: abstain
- Danielle Bishop: yes
- Laura Daire: yes
- Kim Frost: yes
- Mike Boston: yes
- Lindsay Nash: yes
- Melanie Eidsmoe: yes

Positive Support Transition Plan (PSTP) documents

- Committee members reviewed the PSTP draft documents (DHS forms 6810, 6810A and 6810B). There were no recommendations for changes to the drafts from committee members.

Optional quality of life survey

- The committee reviewed another quality of life survey example.
- Background: currently, the majority of positive support data collected by DHS focuses on negative things providers are doing (such as using restraint) and there isn’t much, if any, data that captures the positive things providers are accomplishing (such as improving safety, helping people make friends, increasing community inclusion, etc.). The goal of a quality of life survey is to demonstrate good provider work and to give providers an optional tool to evaluate multiple factors that have the potential to improve a person’s life.
- The following recommendations were made on the survey evaluated at this meeting:
Make sure the phrasing is consistent and grammatically correct.

The survey should have multiple formats to fit diverse audiences. For example, one format could be for people who complete the survey themselves, and another format could be for people who need someone to complete the survey for them.

Make sure the Likert scales are similar.

Make sure there is a prompt for the user to refer to past scores and to analyze how scores change over time.

Rephrase some of the questions. Providers should not be answering questions for people on how they feel about something. However, they can answer more concrete questions, like how often staff do a particular task.

Dan and Stacie will work with the other authors to improve the quality of the assessment. They will aim to share a revised copy with the committee in May 2020.

New assessment

A workgroup is meeting every two weeks to work on a new assessment to evaluate the competency of qualified professionals to conduct functional behavior assessments. They are:

- Looking at research on evidence-based skills, for content development
- Pulling data on functional behavior assessments and Positive Support Transition Plans
- Looking at how to determine if changes in the assessment results in changes to people’s plans
- Looking at how to demonstrate there is a problem with FBAs.

The committee discussed using DHS form 6810F to collect data for this project, to see if all committee members come up with the same results for each individual assessment. Further information is needed to determine if private health information can be used for a purpose other than what it was submitted for. Additional permissions and a Tennessen Warning might be needed. Stacie and Linda will consult with other DHS staff to get more information about using private health information for this project.

Committee members were told they have time to think about this and they were not required to commit to anything during the meeting.

Progress on finding occupational therapists who will work with people the EPRC is following

This problem ties into a bigger problem across the state where there is a shortage of intervention support service providers for multiple specialized professions. Some of the problems include people not knowing how to bill for the services, licensed professionals not knowing there is a need, case managers being unsure when to authorize services or how to set them up, etc. DHS staff are currently working on presentations for this topic and will be traveling around the state over the next year to recruit people into these services. Customized presentations will be given to different audiences and will target service providers, case managers, college students, and people who are interested in becoming providers.

It is anticipated that committee representatives might be asked questions about these presentations through their work with providers, so when the presentations are ready, they will be shared with the committee.

DHS efforts to follow up on 911 incident reports.

There was no new information to share. DHS staff continue to follow up on 911 BIRF incident reports.
New resource for providers

- Customized support for providers is now available for free through STAR Services. Details can be found in a DHS eList announcement. Committee members are encouraged to share this resource with the providers they work with.

Subcommittee updates

- The Requests for Approval subcommittee met with a provider to discuss next steps after Technology for Home ended. DHS staff are still working diligently to get the program running again.
- The Emergency Use of Manual Restraint (EUMR) subcommittee is still working on a data review, and more information will be provided sometime this summer.

Closing

- Read aloud: “The committee is meeting with a care team for the last thirty minutes of the normal meeting time. This meeting is closed at 3:25pm as required by Minn. Stat. § 13D.05, subd. 2(a)(3), to conduct business requiring discussion of health, medical, welfare, or mental health data that is classified as not public under the Minnesota Government Data Practices Act.”