

BSCIP Advisory Council Performance Quality and Improvement Committee Meeting (Tentative Dates)-20240201_140431-Meeting Recording

February 1, 2024, 7:04PM

41m 47s

 **DiCaro, Samantha** joined the meeting

RS **Robinson, Kimberly S** 0:38

OK, it's 205.

So we're gonna go ahead and get started and Rob, who is our IT guy?

That's always on our call.

We love rob.

He is going to be recording the meeting just so everybody is aware of that.

 **Adriana Valbuena MD (Guest)** joined the meeting

RS **Robinson, Kimberly S** 0:53

So welcome everybody.

9 **9d81ba9b-8e0b-439e-8aee-39eb8414fbd5** 0:54

So.

RS **Robinson, Kimberly S** 0:54

I appreciate you taking time out of your day to join us.

Umm, there should be pretty good meeting.

I think we've got some good information to share with everybody as a follow up from our last meeting.

 **9d81ba9b-8e0b-439e-8aee-39eb8414fbd5** left the meeting

RS **Robinson, Kimberly S** 1:07

So with that, I'll turn it over to Madonna.

Who is your committee lead?

Madonna, are you there?

SM Stotsenburg, Madonna 1:21

Yes.

Can you hear me?

RS Robinson, Kimberly S 1:22

Oh OK Yep, I can hear you now.

SM Stotsenburg, Madonna 1:25

Alright, perfect.

Sorry, I was talking on mute.

We can go ahead and start.

Thank you everybody for attending this afternoon.

We can go ahead and start with roll call.

RS Robinson, Kimberly S 1:37

OK, so I'm gonna be doing roll call today because Josh is not here today.

Caitlin is back.

So we're happy to have her back from her maternity leave, but I didn't ask her to do roll call because this is her first day back, so I'm gonna do roll call.

So as I say, your name, if you'll just say present, I appreciate it, Don Chester.

CD Chester, Don 2:00

Present.

RS Robinson, Kimberly S 2:03

Kevin Malone.

KM Kevin Mullin (Guest) 2:06

Present.

RS Robinson, Kimberly S 2:09

Doctor Rhonda Ross.

Patty Lance.

PL **Patty Lance** 2:16

Press then.

RS **Robinson, Kimberly S** 2:19

Jennifer lannon.

Daniel Nicholson.

Jeffrey secure.

Michael fada.

My daughter, Madonna, starts Enberg.

SM **Stotsenburg, Madonna** 2:43

Present.

RS **Robinson, Kimberly S** 2:46

Still olnick.

1 **158a17f5-b1cf-40cc-87e3-055a2f6766f6** 2:48

President, can you hear me?

RS **Robinson, Kimberly S** 2:51

The doctor?

Yes, doctor valbuena.

1 **158a17f5-b1cf-40cc-87e3-055a2f6766f6** 2:54

OK. Thanks.

RS **Robinson, Kimberly S** 2:56

Doctor Valbuena, I know she was on.

I see her in here.


Can you hear us, Doctor Valbuena?

I see her in the meeting.


Doctor Higdon.


 **Wanecski, John M** joined the meeting

 **Dr. Brian Higdon** 3:15
Here.

 **Robinson, Kimberly S** 3:17
Doctor haridas.
Harry rayburn.
And Ruth Tattersall.
OK.
So we have 1/2.
We only have four of our committee meetings and that is not a quorum, so we cannot vote on minutes from.

 **Adriana Valbuena MD (Guest)** left the meeting

 **Robinson, Kimberly S** 3:50
October and December, we cannot vote on minutes.
So with that, I'll turn it back over to you.
Madonna should a one of the other committee members log in late.
I'll keep an eye on the attendance and if somebody should log in late then I'll let you know and we can go back to minutes.

 **Stotsenburg, Madonna** 4:11
Perfect.
Thank you.
All right.
We'll go ahead and jump into the agenda.
So improving the quality of work and staff performance is the RIMS team on for an update.

 **f1f43791-dd10-411e-b87c-317ea6caccfd** joined the meeting

 **Robinson, Kimberly S** 4:25

Uh.

Yes.

Uh.

Yep.

SL **Strickland, Amanda L** 4:29
Sorry.

RS **Robinson, Kimberly S** 4:30
Uh.
Amanda is is on the call today.
She is our project manager for RIMS.

SL **Strickland, Amanda L** 4:33
Yes.
So I do have an update I with rims and we have added a we've updated the Central registry form for homeless.
It's a we now have an option whether they are yes, no or unknown and a drop down and and then now they are working on developing a business rule to make sure that the case managers record a homeless clients last known location before moving them into a end to end service if they're eligible or closing them out if they are not.
Yeah.
Have an update.

DH **Dr. Brian Higdon** 5:17
The thank you.
That's good.

RS **Robinson, Kimberly S** 5:21
So we're hoping if I'm if I'm correct, Amanda, we're hoping that maybe with our next promotion, which should be the end of this month, that these changes will go in effect.
And then we can start tracking homeless.

SL Strickland, Amanda L 5:35
Correct.

RS Robinson, Kimberly S 5:37
OK.

SL Strickland, Amanda L 5:40
So the last week of this month, we'll push that to to production.

SM Stotsenburg, Madonna 5:46
That's awesome.
With that, so, once we start tracking, we can bring that back on a dashboard to this committee so we can see the impact.

SL Strickland, Amanda L 5:59
Sure. Yeah.

CD Chester, Don 6:03
Amanda, this done.

RS Robinson, Kimberly S 6:03
That's something that.

SM Stotsenburg, Madonna 6:03
That's great.

CD Chester, Don 6:04
Chester, can I ask you, can I ask you a quick question?
I know in Palm Beach County we did our our homeless count, let's say about 10 days ago, it was that done statewide.

 **Adriana Valbuena MD (Guest)** joined the meeting

CD **Chester, Don** 6:15

On the same time.

RS **Robinson, Kimberly S** 6:18

I am.

I cannot answer to that.

I do not know.

CD **Chester, Don** 6:22

I'm just curious, but that's not that important.

Thank you.

 **f1f43791-dd10-411e-b87c-317ea6caccfd** left the meeting

SM **Stotsenburg, Madonna** 6:27

Don, do you know where that survey came from?

CD **Chester, Don** 6:31

It it, it comes from the Palm Beach County community services and they have not released the numbers yet.

I think they're still going over them.

It was around 1800 last year, but I'm assuming it it may go up a little bit this year.

CB **Collins, Valerie B** 6:50

That's actually, that's actually a.

CD **Chester, Don** 6:50

I'll find I'll find out.

CB **Collins, Valerie B** 6:53

So it's actually a national account.

It's called the point in time.

CD **Chester, Don** 6:56

OK.

CB **Collins, Valerie B** 6:57

They do it every January for homeless, so I'm I'll see if I can find where they post that for.

CD **Chester, Don** 7:01

Oh, thank you.

CB **Collins, Valerie B** 7:07

So you know, for the Florida numbers?

SM **Stotsenburg, Madonna** 7:11

Thank you.

All right.

Does anybody else have any questions on that or for the RIMS team?

All right.

We'll move on to survey discussion.

So there was a facility survey update.

RS **Robinson, Kimberly S** 7:35

So Becky, before you speak on that.

I have a confession to the Council.

No.

As I was reading through the Minutes from our meeting in December, I don't think that the counts, we didn't have a quorum.

So the Council didn't actually vote on the facility surveys, but I sent it to communications.

It got passed through communications and came back and I had Becky send the surveys out.

So not remembering that you all had not voted on them.

So that's my confession for today.

DH **Dr. Brian Higdon** 8:14

Yeah.

I mean, per my memory, I we knew that at the time that we didn't have a quorum, but as an expediency.

I think it was discussed at the time that it was gonna get sent to communications without that vote, just so we can move things along here.

RS **Robinson, Kimberly S** 8:34

OK.

SM **Stotsenburg, Madonna** 8:35

Yeah, I.

RS **Robinson, Kimberly S** 8:35

Well, I just wanted to make sure everybody was clear on that.

SM **Stotsenburg, Madonna** 8:40

Yes, I agree.

CD **Chester, Don** 8:40

If, if you're gonna do, if you're gonna do anymore confessions, I will be glad to get one of the priests down here.

RS **Robinson, Kimberly S** 8:50

That's it.

That's all I have today.

Don, that's all I've had.

CD **Chester, Don** 8:53

Alright, OK, I'm glad that's good.

RS **Robinson, Kimberly S** 8:53

That's my biggest sin today, so I'm good if that's the worst thing I've done today,

then I am doing fantastic.
So, but Becky did.

RR **Robinson, Rebecca** 9:02
No.

RS **Robinson, Kimberly S** 9:03
She did send them out and she does have some results to share with you guys.

SM **Stotsenburg, Madonna** 9:08
Perfect.

RR **Robinson, Rebecca** 9:09
OK.

SM **Stotsenburg, Madonna** 9:09
Thank you.

RR **Robinson, Rebecca** 9:09
Good afternoon, everyone.
I did send them out.
I sent out 35 invitations and I received only 6 responses to them, but we did get some good responses from them.
Then I think Kim will be able to share with the regional managers and each region.
Umm as to what they need from the program? Umm.
I've got some things highlighted here. Uh.

SM **Stotsenburg, Madonna** 9:50
Before we go into the results, can we or are we allowed to know who responded?

RR **Robinson, Rebecca** 9:51
One of the questions go ahead.

SM **Stotsenburg, Madonna** 9:59
Can we just?

RS **Robinson, Kimberly S** 9:59
Ohh yeah yeah.

RR **Robinson, Rebecca** 10:01
Yeah.

RS **Robinson, Kimberly S** 10:01
That, yeah, we can tell you who responded of, of course.

RR **Robinson, Rebecca** 10:03
Yeah, I've got it.

This one was from John Hopkins All Children's Hospital by Karen McCauley.
And it was question #8 is your facility or self aware of what services are provided by the brain and spinal cord program for eligible clients and if it was no, we asked him to please give their contact information and she actually put her information so that we could get with her and and figure out what would be the best way for them to get information whether it's an in service or you know just brochures or what have you.
This one came from Lisa Nichols.
At Wolfson Children's Hospital.

SM **Stotsenburg, Madonna** 10:47
Team.

RR **Robinson, Rebecca** 10:51
Umm it was question #3.

What's resources would better support your facility on the referral process and they they said a list of the DoH that is sent out to us to let us know who is or is not on the list or a site we can check to ensure patient is on the list, which I'm not quite sure what she's saying there, Kim.

RS **Robinson, Kimberly S** 11:17

He's probably wanting to know if patients that were referred to the program, if we received the referrals as how I would interpret that.

And so we have to be really careful with HIPAA on how we respond to those questions.

RR **Robinson, Rebecca** 11:26
OK.

RS **Robinson, Kimberly S** 11:32
We can't just say yes so that that gets tricky.

RR **Robinson, Rebecca** 11:36
Yeah.
OK.
And then on four, what barriers have any do your staff experience?
And she says having a Social Security number to list for patients as a mandatory field.
Not all pediatric patients were born in Florida and May or may not have a Social Security number.
So, but I think they can put a pseudo number in campaign.

RS **Robinson, Kimberly S** 12:01
Yes.
So if if there is not a Social Security number on the referral form that is not a game changer, rims automatically generates a number in place of that a dummy number and it always starts with GENN.
So we know that that is a generated number to fill that field.
To meet that requirement.

RR **Robinson, Rebecca** 12:22
Yeah.

RS **Robinson, Kimberly S** 12:23
The case manager can then go back and verify with the parents or the client or whomever to try and get a Social Security number.

RR **Robinson, Rebecca** 12:35
And then on question 8, same same person is your facility or staff aware of what

services are provided by the brain and spinal cord program for eligible clients?
She said yes, an in service would be great to better explain and understand what services are available.

Better supports the why for completing referrals.

Now we've got a couple places that really could use an in service U.

DH **Dr. Brian Higdon** 12:58

Yep.

Good.

RR **Robinson, Rebecca** 13:03

This ones from pardon me.

DH **Dr. Brian Higdon** 13:06

Sorry, I I wanna go back to that other question about the Social Security number.

We want to keep it.

We want to keep it mandatory, but then if they don't have it, umm, is there a way to indicate that that just to go ahead and send it in case it's maybe referral doesn't get made when it's not available?

RS **Robinson, Kimberly S** 13:28

I'd have to actually go back and look at the referral form because if they don't fill it out, we can still put the client in and I just need to look at it to see if it is marked with a little asterisk as required or not that I don't know from off the top of my head.

PL **Patty Lance** 13:43

You know, it was most people didn't.

RR **Robinson, Rebecca** 13:46

I think it probably is a required field and that's why we put the generated one in.

PL **Patty Lance** 13:47

You couldn't.

You just windows are still fabulous.

DH **Dr. Brian Higdon** 13:47

Yeah.

PL **Patty Lance** 13:52

They put sofa.

RS **Robinson, Kimberly S** 13:53

It should be.

RR **Robinson, Rebecca** 13:57

Umm OK, this is the next one and this one from Nicholas Children's Hospital as well from a Samantha Munoz question three, what resources would better support your facility on the referral process?

And she said an email address to send referrals to the fax system seems antiquated.

RS **Robinson, Kimberly S** 14:20

OK, so on the referral form, I don't think that we list central registries email box, but we can add that it is in our brochures and our information that we send out about the program we provide the email box for central registry.

So referrals can be emailed.

There are a few that do email, but primarily as that facility said, most referrals come in via fax, but we do have the facility.

I'm sorry, we do have the ability to receive referrals via email.

So perhaps an Amanda.

RR **Robinson, Rebecca** 14:57

OK.

And the last, I'm sorry.

RS **Robinson, Kimberly S** 14:58

This might be something.

I'm sorry, Becky.

One second, Amanda, this might be something that we need to talk with rims to see about having that added to the referral form as part of the document.

SL Strickland, Amanda L 15:11

OK, I will do that.

RR Robinson, Rebecca 15:17

OK.

And the last one is from HCA, Florida Lawnwood hospital.

Question three, what resources would better support your facility on the referral process and the question or this response was more education of what they do doubt?

That sounds like another in service is needed.

SM Stotsenburg, Madonna 15:43

Perfect.

RS Robinson, Kimberly S 15:43

OK.

SM Stotsenburg, Madonna 15:44

Thank you.

RS Robinson, Kimberly S 15:44

And so we'll, we'll make sure that the regional managers that are in those service areas get this information as well, so that they can make contacts to see about providing an in service.

RR Robinson, Rebecca 15:45

But.

DH Dr. Brian Higdon 16:00

It's it's interesting that half of the hospitals that responded were pediatric hospitals when that's really the minority of hospitals in the state of Florida.

SM Stotsenburg, Madonna 16:01

Ohh.

DH **Dr. Brian Higdon** 16:07

I don't know if they have more resources or just more dedicated staff, or I don't know, or very responsive.

Umm, the.

I there's a question in there kind of kind of almost like a trick question that we put in there about who they should be referring.

Were they entering that one appropriately?

RR **Robinson, Rebecca** 16:28

I think they were.

Doctor Higdon, let me check here, but I'm almost positive that most everybody said.

Umm yeah.

This one was from Broward North and it said all patients with traumatic brain or spinal cord injuries.

This ones from Broward Health, medical, all patients with traumatic brain and spinal cord injuries.

Different people, obviously this ones from John Hopkins, all patients with traumatic brain and spinal cord injuries.

Wolfson all patients with traumatic brain and spinal cord injuries.

Uh, I'm Nicholas.

This one also has all patients with traumatic brain and spinal cord injury.

And this one is from HCA, Florida, Longwood patients with brain or spinal cord injuries who may need assistance from the brain's vinyl cord injury program with equipment therapy or community resources.

DH **Dr. Brian Higdon** 17:43

Alright.

Yeah.

And and you're already commented that that they were sort of commenting that they need more information.

So that would be a piece of information that that they need.

Alright, thank you.

RR **Robinson, Rebecca** 17:58
You're welcome.

SM **Stotsenburg, Madonna** 18:01
Do we have a list of the other hospitals that are we still pending or can we resend those?

RS **Robinson, Kimberly S** 18:12
We we can resend them.

RR **Robinson, Rebecca** 18:12
I still have the list.

RS **Robinson, Kimberly S** 18:15
Yeah, they could be resent again.
And we can you omit the ones that already responded?

SM **Stotsenburg, Madonna** 18:18
OK.

RS **Robinson, Kimberly S** 18:21
Becky, can you omit them?

RR **Robinson, Rebecca** 18:22
Yeah, I'll have to do.
I'll have to take them off, yeah.

RS **Robinson, Kimberly S** 18:25
OK.

SM **Stotsenburg, Madonna** 18:27
And that this went to.
Trauma centers it only trauma centers.

RS **Robinson, Kimberly S** 18:35

Yeah.

So it went to all of the trauma facilities.

I got the list from Kate Kosovars.

SM **Stotsenburg, Madonna** 18:39

OK.

RS **Robinson, Kimberly S** 18:41

She gave me the list and the surveys went to all of the trauma program managers.

SM **Stotsenburg, Madonna** 18:47

Huh.

I didn't receive it.

RR **Robinson, Rebecca** 18:49

And.

And this is Madonna.

SM **Stotsenburg, Madonna** 18:59

Yes.

RR **Robinson, Rebecca** 19:00

You were actually on the list twice.

Madonna and I'm.

I'm I'm sure I only sent it out once to you because it was the same email address and you never got it.

SM **Stotsenburg, Madonna** 19:11

No, I haven't received it.

RR **Robinson, Rebecca** 19:14

Let me verify that email address then.

Let me see what I've got here.

SM Stotsenburg, Madonna 19:22
I was probably on. Uh.

RS Robinson, Kimberly S 19:25
You were on for Saint Mary's in Delray.

RR Robinson, Rebecca 19:25
You were, as an interim for somebody.

SM Stotsenburg, Madonna 19:27
Yeah. Yes.

RR Robinson, Rebecca 19:32
Umm, I have a lot here to yeah, three to find your name.

SM Stotsenburg, Madonna 19:39
That's OK, I can send a follow up with my email and then and then I'll get it completed and sent back from each of our areas.

RR Robinson, Rebecca 19:43
OK.
OK.
Yeah, I've got madonna.stautzenberger@tenthhealth.com.

RS Robinson, Kimberly S 19:51
And I.

SM Stotsenburg, Madonna 19:58
Tenant TENET.

RR Robinson, Rebecca 20:02
Ohh yeah, tenant.
I'm sorry.
Yes, Senate health.com.

SM Stotsenburg, Madonna 20:04

That's OK.

Yes, that should that should be it.

I wonder if it went to my.

RR Robinson, Rebecca 20:11

Well, I'm not sure why you didn't get it.

RS Robinson, Kimberly S 20:12

Maybe it went, maybe, maybe it went to spam or or junk and so Becky, you sent that survey out and gave them a two week turn around on that, correct?

SM Stotsenburg, Madonna 20:17

Yeah.

RR Robinson, Rebecca 20:23

Yes, I did.

Yes.

RS Robinson, Kimberly S 20:25

OK.

So we'll do.

RR Robinson, Rebecca 20:26

So do we wanna give them another two weeks?

RS Robinson, Kimberly S 20:29

Yes, ma'am.

That would be my recommendation.

SM Stotsenburg, Madonna 20:33

And what we can do is let me see foot sack meat, the foot sack meats right after this.

So we can let them trauma program leadership.

No, that to watch for these emails?
Who will they be coming from?

RR **Robinson, Rebecca** 20:55

Uh, Becky Robinson.

SM **Stotsenburg, Madonna** 20:57

Becky.

Robinson.

RS **Robinson, Kimberly S** 21:00

They're they're through SurveyMonkey.

RR **Robinson, Rebecca** 21:00

I guess it actually.

It'll save Rebecca Robbins.

It'll probably save Rebecca Robinson.

Yeah, from SurveyMonkey.

SM **Stotsenburg, Madonna** 21:06

Sure, monkey.

OK.

Perfect.

I'll.

I'll get that out.

I'll send an email out to all the trauma program managers throughout the state just so they'll watch for it.

RS **Robinson, Kimberly S** 21:20

Ohh, awesome.

RR **Robinson, Rebecca** 21:20

Thanks.

RS **Robinson, Kimberly S** 21:21

Thank you.

SM **Stotsenburg, Madonna** 21:22

No problem.

Thank you for bringing that data back.

RR **Robinson, Rebecca** 21:29

Oh, you're welcome.

SM **Stotsenburg, Madonna** 21:32

Alright.

Any questions?

All right.

We'll move on to data analysis.

So we were talking about the rehabilitation centers, the trauma hospitals.

We got an update of those referrals and then the non trauma hospital referrals.

I think as we get the responses back from the trauma hospitals, that'll give us a good start and then we can kind of do the same.

If I'm recalling correctly, I'm reviewing the minutes yesterday, then we can kind of come back and tackle the rehab centers.

Is that correct?

Or does anybody have any statement on that?

RS **Robinson, Kimberly S** 22:15

Yeah.

That.

Excuse me.

What I can provide you all is I did.

I pulled a report of all the referrals for the first quarter and second quarter and I put them in a pivot table.

CD **Chester, Don** 22:33

Right.

RS **Robinson, Kimberly S** 22:36

There's detail, but then I did summaries as well and you know I can let me pull it over to this screen.

CD **Chester, Don** 22:36

I was like.

RS **Robinson, Kimberly S** 22:44

So for the first quarter, for the first quarter, umm, there were 484 referrals and it's again it's broke down by, I'm sorry from my colors on here, this is where I need my data analysts to make them look pretty.

SM **Stotsenburg, Madonna** 22:44

Thank you.

RS **Robinson, Kimberly S** 22:58

So umm, but it broke it down by the referral source.

And then when you and I'll send this out to the Council members and then when you open the little plus sign, it's gonna tell you whether it was a brain injury, spinal cord injury, dual and the county that the referral came from.

CD **Chester, Don** 23:08

That's.

Eventually.

RS **Robinson, Kimberly S** 23:18

So when you open these up, you can see we got a total of three brain or four brain injuries, referrals from baked 3, three brain injury from day one from Washington and a brain and spinal cord from Bay.

So I kind of broke it down a little bit more.

So you could see the type of injuries the counties and the facilities.

So that was the first quarter.

So that's the summary and the summary for the second quarter and and again, I'll, I'll have Raj Macy's a little prettier.

There were 450 referrals from the second quarter.

You had a question?

Doctor Higman.

I saw you talking, but you're muted.

DH **Dr. Brian Higdon** 24:03

Yeah.

So, uh so BI means brain injury and then BS is brain and spine.

RS **Robinson, Kimberly S** 24:09

Yes.

DH **Dr. Brian Higdon** 24:10

OK, makes sense.

RS **Robinson, Kimberly S** 24:10

And then spine is just SI?

DH **Dr. Brian Higdon** 24:13

Inside.

RS **Robinson, Kimberly S** 24:16

So I'll send this out to the Council.

I'll add it actually a probably to the calendar event.

That way it'll be there for you guys and it won't get lost.

SM **Stotsenburg, Madonna** 24:29

Thank you.

RS **Robinson, Kimberly S** 24:31

And this was this was kind of interesting to look at.

I thought it was anyways, so when the next quarter ends, I'll add quarter three on here and then at the end of the year I'll have four quarter four.

DH **Dr. Brian Higdon** 24:40

Yeah.

RS **Robinson, Kimberly S** 24:46

So for quarter three, we'll probably, I'll probably have that or I will have that for our may face to face meeting.

SM **Stotsenburg, Madonna** 24:56

Thank you.

And if hospitals are not on here are those case managers reaching out to those hospitals to look for opportunities to refer?

RS **Robinson, Kimberly S** 25:09

Well, we're always looking for opportunities to provide in services.

So we've had a few rehabs that are regional managers have been reaching out to, to go and actually provide in services about the program as well.

SM **Stotsenburg, Madonna** 25:25

OK, that's great.

That's great.

Does anybody else have anything to add and do we have a?

Any questions, comments.

Alright then we will open the floor for any new business.

We have a couple of bullet point items that a few people brought up.

Umm, so a couple of asked have been to get monthly or by monthly reports on the number of referrals which I think will get that through what was just presented and then open and closed case review disk for discussion.

Umm, somebody have breached out to me and asked if we could maybe if we have like a case presentation to kind of walk through what the process looked like, go through what the patient and the family went through, maybe get feedback from the facility.

And then just for discussion here to look at the process, does anybody have any comments on that or?

RS **Robinson, Kimberly S** 26:37

So are you asking umm for like the regional managers to provide you a case that from the time it was open to the time it was closed, as I'm trying to understand specifically what you're wanting and what happened during that including services that were provided or you know if there were any? Obstacles that maybe they had to face and overcome.

SM **Stotsenburg, Madonna** 27:08

Yes, that's that's what we were.

We're looking for that way we could do for that performance improvement review and to see if the you know just to have this group with multiple backgrounds and expertise to look at the process and maybe make suggestions or help the case managers break any barriers.

RS **Robinson, Kimberly S** 27:12

OK.

OK, so do you want one case like at our next committee meeting or do you want each regional manager to have a case for you to look at? Were you just want, how do you want to?

SM **Stotsenburg, Madonna** 27:44

I I think I think if we start with one case, maybe the a case that went through the process there, there was some meat to it.

RS **Robinson, Kimberly S** 27:45

How do you want to start that?

SM **Stotsenburg, Madonna** 27:56

Umm, so that way we can open and have good discussion and kind of understand what this process looks like and walk through it step by step.

RS **Robinson, Kimberly S** 27:56

OK.

SM Stotsenburg, Madonna 28:06
Does anybody else have any comments on that or suggestions?

RS Robinson, Kimberly S 28:06
Sure.
That's our task.
You would identifying a client for the the next P Qi meeting.
Thank you.

CB Collins, Valerie B 28:21
OK.

SM Stotsenburg, Madonna 28:28
Does anybody else have anything to add or anything that you would like to see from this committee?

DH Dr. Brian Higdon 28:37
I think the idea of kind of having a of of a walkthrough of a single case is actually would be very insightful for me and probably the rest of the probably the rest of the committee.

RS Robinson, Kimberly S 28:49
Do you want the short version right now or do you wanna wait until you actually have a case?

SM Stotsenburg, Madonna 29:00
I personally feel I think we should wait until we have a case.

RS Robinson, Kimberly S 29:04
OK.

SM Stotsenburg, Madonna 29:05
It helps me put over all the pieces together cause we've kind of walked through the application.

Now we can actually apply it to a patient situation and see it, but I am open for any suggestions or anybody else's. Umm. Recommendations.

AM **Adriana Valbuena MD (Guest)** 29:24

I agree.
I think I'm waiting for the actual case.
It will be my.

RS **Robinson, Kimberly S** 29:29

OK.

DH **Dr. Brian Higdon** 29:34

You're here.
Doctor Valbuena does she make quorum or probably not.

AM **Adriana Valbuena MD (Guest)** 29:38

So that I think I have some technical issues when my name was called.

RS **Robinson, Kimberly S** 29:45

But I saw you online, so I knew that you were here and I had heard you previous, so I counted you in.

AM **Adriana Valbuena MD (Guest)** 29:47

OK.
Thank you.

RS **Robinson, Kimberly S** 29:54

My pleasure.

SM **Stotsenburg, Madonna** 30:00

Perfect.
Does anybody else have anything that they would like to add to the discussion?

AM **Adriana Valbuena MD (Guest)** 30:06

I was on a separate thing.
Umm, about the at all.
The assistant thing you were added on this email.
Uh, Brian, the presentation, the.
Exhibition Hall for the Florida meeting.

DH **Dr. Brian Higdon** 30:27

Yeah.
Yeah.
Oh yeah, I I'm way behind my emails. Yeah.

AM **Adriana Valbuena MD (Guest)** 30:31

Yeah.
So doctor charma?
He said current chair of the meeting and he replied I mentioned it to him about, you know, we could be civility to have the time to present or educate in general, all the the participants of the meeting.

DH **Dr. Brian Higdon** 30:35

Umm.

AM **Adriana Valbuena MD (Guest)** 30:50

And he replied to me in the email, saying that he was able to get a free table at the exhibition call.

DH **Dr. Brian Higdon** 30:51

Yeah.
Nice.

RS **Robinson, Kimberly S** 31:00

I recall seeing that now that you bring it up, I I remember seeing that.
So that's great.

DH **Dr. Brian Higdon** 31:07

Yep.

AM **Adriana Valbuena MD (Guest)** 31:07

Yeah.

DH **Dr. Brian Higdon** 31:08

Yeah, we should collaborate in, in and maybe make a PowerPoint and and and do a talk or something.

AM **Adriana Valbuena MD (Guest)** 31:09

It also.

DH **Dr. Brian Higdon** 31:15

I I'm not sure the timeline of when we have to submit that.

But.

RS **Robinson, Kimberly S** 31:21

When is the tell me the date of the meeting again?

Forgive me, I'm sorry.

AM **Adriana Valbuena MD (Guest)** 31:27

This says it's September 2024 in Orlando.

RS **Robinson, Kimberly S** 31:30

September.

OK, alright, I thought it was September.

I didn't wanna say that and have to confess another sin. So.

DH **Dr. Brian Higdon** 31:41

Alright, 21st.

RS **Robinson, Kimberly S** 31:45

So any presentation, a PowerPoint that you might want to provide at that exhibition, you can submit it to myself.

We have to follow the DOHC brand on all PowerPoints and submit them to communications for approval before we can actually use them.

So I would dare say.

Sometimes it takes a while to get things through communications.

If you could have that, you know to me by June, that should allow plenty of time to make sure it's branded correctly and sent over to communications.

DH **Dr. Brian Higdon** 32:32

Umm, I actually have a concurrent.

Another I conference I'm probably gonna be going to that other conference, so I wouldn't be able to present it this one, but Doctor Valeria would be really great if you could do that.

RS **Robinson, Kimberly S** 32:44

OK.

AM **Adriana Valbuena MD (Guest)** 32:48

I probably be able to insult to this.

DH **Dr. Brian Higdon** 32:50

Right.

AM **Adriana Valbuena MD (Guest)** 32:55

I think it's going to be as an opportunity to educate in general about the program, the research that we have on.

DH **Dr. Brian Higdon** 33:01

Yep.

AM **Adriana Valbuena MD (Guest)** 33:03

Yeah, I can work on that.

RS **Robinson, Kimberly S** 33:09

We can put it in the brand if you put it together, we can put the logos on it and use the correct font, and DOHC has specifics that they require.

AM Adriana Valbuena MD (Guest) 33:09

They said.

RS Robinson, Kimberly S 33:20

So we if you just do your screens, your PowerPoints what you want, then we can take it and add the uh, like I said the.

The schemes, but you know the scheme to it because they have certain fonts and they have logos.

AM Adriana Valbuena MD (Guest) 33:34

Yes.

And for a month, yeah.

RS Robinson, Kimberly S 33:36

Yes, thank you.

The formatting of it.

AM Adriana Valbuena MD (Guest) 33:39

Yeah.

RS Robinson, Kimberly S 33:39

I couldn't spit that out.

I have brand stuck in my head here.

AM Adriana Valbuena MD (Guest) 33:44

You really they also.

They also mention.

Ohh it's there.

There is any way that they could really my email they can get in the word out about the meeting translate through like what size or that you're gonna be presenting or not sure exactly possible.

RS Robinson, Kimberly S 34:04

We can.

Becky can add it as an event on our our Resource Center website and as a sidebar to that, the website is actually moving along very well.

RR Robinson, Rebecca 34:11

Just.

RS Robinson, Kimberly S 34:17

I have a meeting with Amanda and a couple other folks.

Right after this meeting.

So we are gonna hit our deadline to have it available to present to you all at the face to face meeting we we will hit that deadline.

RR Robinson, Rebecca 34:35

And if you want me to post that on our website, I'll need to get all the information from you.

Date.

Place time all that information.

AM Adriana Valbuena MD (Guest) 34:43

OK, alright.

I gonna forward this email.

I think there is someone to specifically contact to get all that in from.

I just haven't played in months in the year.

I don't have the details on, but I will forward.

I think I did forward to you, Kimberly, but if you want me, I can just reforward.

RS Robinson, Kimberly S 35:01

Yes.

RR Robinson, Rebecca 35:03

OK.

Can I can get it from Kim?

AM Adriana Valbuena MD (Guest) 35:06

If not that, I can just resend it.

I know this is was the day I was taking the cruise.

My pool, where they formation before entering the cruise on vacation, so I can if you don't find it on happy to resend it.

RS **Robinson, Kimberly S** 35:21

OK.

I know, I know, I have it.

SM **Stotsenburg, Madonna** 35:35

Perfect.

And then just jumping along for the in person meeting, just a reminder that there was an email that was sent out.

So everybody on the committee, if you could go in and select your times of availability, I believe it's due by tomorrow.

AM **Adriana Valbuena MD (Guest)** 35:56

Uh hello?

SM **Stotsenburg, Madonna** 35:56

I just jumped in.

AM **Adriana Valbuena MD (Guest)** 36:00

I think I got that email.

Maybe I turned to me recently.

SM **Stotsenburg, Madonna** 36:06

No.

AM **Adriana Valbuena MD (Guest)** 36:06

When was sent out?

SM **Stotsenburg, Madonna** 36:08

Let me I just pulled it up. Uh.

RS **Robinson, Kimberly S** 36:13

Becky sent it out as a doodle poll.
Becky, you know, when you sent that out?

RR **Robinson, Rebecca** 36:33
I don't know exactly I can give you a rough estimate.

AM **Adriana Valbuena MD (Guest)** 36:37
So you could you resend it?

CB **Collins, Valerie B** 36:37
I think it.

AM **Adriana Valbuena MD (Guest)** 36:38
To me, it's possible.

DH **Dr. Brian Higdon** 36:40
Is January 25th.

CB **Collins, Valerie B** 36:42
Yeah.

SM **Stotsenburg, Madonna** 36:42
Yeah, January 25th.

AM **Adriana Valbuena MD (Guest)** 36:42
How they look at it?

RR **Robinson, Rebecca** 36:43
Why is it January 25th OK?

AM **Adriana Valbuena MD (Guest)** 36:51
Oh, I got it.
Thank you.

SM **Stotsenburg, Madonna** 36:58

Perfect it.

RR **Robinson, Rebecca** 37:00

So you got it, everybody got it then, OK.

SM **Stotsenburg, Madonna** 37:03

Yes, I I found that one.

I did not find the trauma surveys.

RR **Robinson, Rebecca** 37:09

OK.

I'll I'll include you.

Madonna.

I'm gonna send you a little test email after this meeting just to see if you get it OK.

SM **Stotsenburg, Madonna** 37:15

OK, that sounds perfect.

RS **Robinson, Kimberly S** 37:22

So looking at the doodle pole so far for the February or I'm sorry for the may face to face meeting right now.

Uh.

The dates that are most popular are Thursday the 9th and Thursday the 16th, and as soon as the Doodle poll closes, I've already spoke Doctor Higdon to Robert Mills, who handles all of our disaster preparedness, and as soon as I have that date then I have to coordinate with him to make sure that he's available.

But he is willing to speak.

I already set that up for us, so we just gotta give him a general idea on if there's anything specific that you want him to speak on at that meeting.

DH **Dr. Brian Higdon** 38:11

Sorry, I've got hospital beep in the background.

I I didn't.

I don't have anything else to tell my head, but I kind of disaster paired preparedness on a kind of a state or educational level.

But then also kind of the best strategies to kind of educate people with disabilities, how to prepare for.

How to prepare for a disaster and kind of intersection with B?

Skip with that.

RS **Robinson, Kimberly S** 38:42

OK, that's kind of what I I think I told him.

I I spoke to him yesterday, actually, when I was at Headquarters, I spoke to him.

Uh, so I'll get back with you before the meeting to make sure that we're clear on that first, I have to get my date and then secure the place and then we'll start working on the agenda.

DH **Dr. Brian Higdon** 38:50

This is.

Yeah.

Yep.

Yeah.

And and and any kind of particular stories that he has from all of his experience with kind of like that would highlight all these points.

RS **Robinson, Kimberly S** 39:12

Yeah, he's got lots of experience in this in this field.

SM **Stotsenburg, Madonna** 39:21

I like that discussion and it'll it will tip off hurricane season.

RS **Robinson, Kimberly S** 39:29

Yes, yes.

SM **Stotsenburg, Madonna** 39:32

Alright.

Future meeting dates.

Did we have a couple?

I thought we put.

What did we put on the next meeting already?

RS **Robinson, Kimberly S** 39:48

Caitlin had already pre scheduled all the way out through the year.

SM **Stotsenburg, Madonna** 39:53

Perp I was flexing.

RS **Robinson, Kimberly S** 39:54

Uh, so.

February, March.

So whatever, I don't have my calendar up.

Obviously you see my screen here.

Umm.

SM **Stotsenburg, Madonna** 40:01

What?

RS **Robinson, Kimberly S** 40:02

Caitlin, do you have your calendar in front of you?

What is the P Qi meeting?

What date that is in March?

DE **Daws, Caitlin E** 40:10

I have it.

I'm looking it looks like it's gonna be tentative.

Date of March 7.

RS **Robinson, Kimberly S** 40:16

OK.

DE **Daws, Caitlin E** 40:17

Oh wait, that's hold on.

CB **Collins, Valerie B** 40:18

That's yeah.

DE **Daws, Caitlin E** 40:19

That's the other committee.

It doesn't look like pqj is until April 4th.

RS **Robinson, Kimberly S** 40:24

Ohh, it's April. April.

CB **Collins, Valerie B** 40:26

Or.

RS **Robinson, Kimberly S** 40:26

I'm sorry.

Yeah, April 4th.

SM **Stotsenburg, Madonna** 40:28

Keep.

OK.

Does that work for everybody?

April 4th.

I think this time frame works.

Is this good for everybody?

RS **Robinson, Kimberly S** 40:48

That Thursday seems to be the the best day of the week for everybody, which I'm good with.

SM **Stotsenburg, Madonna** 40:54

Yes.

RS **Robinson, Kimberly S** 40:56

I'm good with Thursday's.

Absolutely.

Never Wednesdays.

I'm never good for Wednesdays.

That's just like my worst day ever.

Because I'm usually a headquarters.

That's why that's my travel day and I'm I'm packed at headquarters.

SM **Stotsenburg, Madonna** 41:11

Ohh.

Alright, so we will plan on our next meeting on April 4th at 2:00.

Do we have a motion to adjourn?

CD **Chester, Don** 41:29

So move.

KM **Kevin Mullin (Guest)** 41:31

I second that.

DH **Dr. Brian Higdon** 41:32

Motion.

SM **Stotsenburg, Madonna** 41:32

Do we have a spec?

Perfect.

Thank you all and I hope you have a great weekend.

CD **Chester, Don** 41:39

Thank you.

AM **Adriana Valbuena MD (Guest)** 41:39

OK.

KM **Kevin Mullin (Guest)** 41:39

You too.

RS **Robinson, Kimberly S** 41:39
You as well.

AM **Adriana Valbuena MD (Guest)** 41:40
OK.

RS **Robinson, Kimberly S** 41:41
Thank you.

1 **158a17f5-b1cf-40cc-87e3-055a2f6766f6** 41:41
Goodbye.

 **Myles, Rosalind M.** left the meeting

CB **Collins, Valerie B** 41:42
Thank you.

RS **Robinson, Kimberly S** 41:42
Bye bye.

SM **Stotsenburg, Madonna** 41:43
Bye.

SL **Strickland, Amanda L** 41:43
Thank you. Bye.

 **Dr. Brian Higdon** left the meeting

 **Samper, Christina** left the meeting

 **Dubrocq, Jose A** left the meeting

 **Jill (Guest)** left the meeting

 **Adriana Valbuena MD (Guest)** left the meeting

 **Daws, Caitlin E** left the meeting

 **Stotsenburg, Madonna** left the meeting

 **Patty Lance** left the meeting

 **Strickland, Amanda L** left the meeting

 **Robinson, Rebecca** left the meeting

 **Casavant, Robert** stopped transcription