

QA/QI Standard Minutes

January 20, 2026

Review of 4th Quarter 2025

❖ Business Operations:

- a. Budget (Revenue and Expenses) – 2026 budget approved.
- b. Marketing and Business Development
 - 1. Advertising for Occupational Therapy
 - 2. Contract executed with BCBS Private Insurance for Speech Therapy. Beginning month of October 2025.
 - 3. Faxed flyers to dr's offices for Speech Therapy and Preschool including we now accept BCBSNC.
- ii. Additional Marketing
 - 1. No additional marketing for 4th quarter.
- c. Regulatory Issues
 - i. Medicaid cuts were implemented for all NC Medicaid services. Cuts were retracted by Governor before year end. Statement issued provides will be reimbursed for the reduction of funds. Unclear of when funds would be reimbursed.
- d. Human Resource Issues (Staffing and Training)
 - i. 4 new hires in 4th quarter. 1 for 1915(i), 2 for Innovations, 1 for preschool.
 - ii. 4 employees were terminated during the 4th quarter.
 - iii. 1 Speech Therapist took a leave of absence due to family medical emergency. The secondary supervisor assumed supervisor duties.

❖ Client Rights

- a. Protective/Restrictive devices approved
 - i. DV – Cubby Bed
 - ii. MT – Cameras
- b. Client rights issues
 - i. None reported

❖ Health and Safety

- a. External Inspections (Reports, analysis, and recommendations, results)
 - i. Completed June 12, 2025. Due annually in June.
- b. Safety Drills (Reports, analysis, and recommendations, results)
 - i. Sarah - Drills were conducted on the following dates
 - 1. Medical – 11/17/2025
 - 2. Fire/Evacuation – 11/19/2025
 - 3. Violent Behavior – 12/22/2025Policies and drill procedures were followed appropriately for all drills.
- c. Self-Inspections (Reports, analysis, and recommendations, results)
 - i. Sarah – Inspection for 4th quarter 2025 completed on 12/15/2025.
- d. Incident Reports (Reports, analysis of trends, recommendations, results)

- i. Sarah – 38 level 1 incidents were reported, 26 were for one SL3 client's medication errors due to sleep disturbance. All were reported and approved by guardian. See attached.
- ii. All procedures were followed, staff responded appropriately. No recommendations were suggested. See attached report.

❖ Quality Improvement

- a. Outcome Management (status, reports, recommendations, results)
 - i. See attached report.
- b. Accreditation and Regulatory Requirements
 - i. Received 3-year accreditation in Sept 2022! Next survey due in 2025, but extended to Feb-Mar 2026.
- c. Policy and Procedure Updates and/or Review
 - i. Continued to discuss procedures to be created and/or updated with employee responsible for updating.
 - ii. Policies and procedures have been reviewed in preparation for CARF survey.
- d. Client Complaint and Grievance (specific and quarterly review of trends)
 - i. 0 concerns/complaints were reported in 4th quarter. See attached.
 - ii. Client Satisfaction Survey report. See attached.
 - iii. Employee Satisfaction Survey report. None completed.
 - iv. Stakeholder Satisfaction Survey report. See attached.
- e. Planning Documents (reports, status of goals and objectives, reformulation)
 - i. Reviewed 2025 plans for 4th quarter and updated status of goals.

❖ Risk Management

- a. Risk Management Plan (exposure to loss)
 - i. Plan reviewed/updated
- b. Employee Concerns, Complaints, Feedback
 - i. Sarah – See Satisfaction Reports.

❖ Other Business

- a. Continued preparation for CARF 2026 (yrs 2023-2025).
- b. Monitor Medicaid cuts effect on revenue.
- c. Will be adding Mental Health Outpatient Counseling Services by June 2026.