

## Council, Committee or Workgroup Meeting Snapshot

# Meeting: Quality Improvement (QI) Council

#### Meeting Date: January 24, 2019

Attendees: (\*by phone)
BABH-Sarah Holsinger
CEI-Elise Magen, Emily Wollner\*,
Bradley\*
CMHCM-Kara L\*
GIHN-Lynn Charping
HBH-Levi Zagorski\*
Lifeways-Gina Costa\*
MCN-Sally Culey\*
NewaygoSaginaw-Julie McCulloch\*
Shiawassee-Becky Dohring
TRD-Susan Richards\*
TBHS-Susan Baranski
MSHN-Sandy Gettel

### **KEY DISCUSSION TOPICS**

- Performance Measure Update: Priority Measures Report FY18. Behavior Treatment Fy18Q4, Performance Indicator Summary FY18Q4
- Performance Improvement Project: RSA-R Administrators Version, Provider, Persons Served, HEDIS Measure Diabetes Monitoring FY18 PIP.
- Retained Contract Functions Update: Critical Incidents
- Medicaid Event Verification Annual report
- Compliance Report-Delegated Managed Care Review Report
- MSHN Priority Measures Performance Report
- Annual QAPIP Effectiveness Review
- MDHHS Meeting Updates: PI Sub Work Group, Consent Form Work Group
- Site Review Updates: Autism Review, Waiver Corrective Action Status

#### ✓ KEY DECISIONS

Joe Wager

- ✓ Review & Approve Minutes- The minutes from 11/15/18 were approved as submitted. No meeting in December
- ✓ Review & Approved agenda no additions
- ✓ Performance Measure Update
  - ✓ Priority Measures reviewed through October 31, 2018. No corrective action required. All performance above the standard for the FUH Children and Adults, Diabetes Screen. Issue of several Open Care alerts with no "raised date" waiting for a response from Zenith. Joe W. to follow up.
  - ✓ Behavior Treatment Review for FY18Q4-Quarterly Summary Reviewed. No changes QIC Approved. Continued discussion related to plans requiring approval. The regional BTPRC is discussing definitions and developing a FAQ document. The FY19 Template was reviewed. Sandy to send out definitions next week and update the template once the interventions and techniques have been received for each training curriculum.
  - ✓ Performance Indicators FY18Q4 reviewed. The following CMHSP participants require a corrective action plan due February 28th: HBH, Lifeways, MCN, Newaygo. Discussed Indicator 10 Re admits within 30 days. 6 of 12 CMHSP performed outside of the standard for Indicator 10. Area of concern contributing to the decreased performance were individuals with co-occurring substance use and consumers who CMHSPs indicate were discharged prematurely against CMHSP advice. No changes to report. QIC approved.
  - ✓ Satisfaction Surveys-Discussion of regional survey process. Sandy to obtain additional information for next meeting.
- ✓ Performance Improvement Projects-Reviewed the Implementation Plan for the RSA Provider, Administrator and Person Served version. No modifications made. Additional discussion will occur next month to finalize the plan including implementation dates. HEDIS Measure FY18 PIP -Reviewed the first 9 months of the data. Will determine potential interventions and barriers to begin development of the fishbone diagram with completion in March.
- ✓ Retained Contract Functions Update: Critical Incidents-Reviewed quarterly summary which included rate per persons served. CMHSPs began to submit Critical Incidents via REMI January 14<sup>th</sup>. No issues to discuss regarding the process.
- Reviewed the MEV Annual Report-Shannon will attend in February for discussion and feedback related to the report and/or process.
- Reviewed the Compliance Report-Amy D will attend in February to participate in discussion and feedback regarding report and/or process.

✓ ACTION STEPS	<ul> <li>Reviewed the QAPIP Effectiveness Report including Priorities for next year. No feedback received for modifications. Recommendations will be reviewed with Operations Council and presented to the Board of Directors in March.</li> <li>MDHHS Meeting Updates</li> <li>Performance Indicator Work Group: No final decisions related the to the Indicators, continued discussion.</li> <li>Site Review Updates</li> <li>MDHHS Waiver Review. Approval of Corrective Action plan was received in December. A reminder to ensure that each CMHSP is following up on the completion of the corrective action plan that each submitted. February was the end date for most of the interventions.</li> <li>MDHHS Autism Review for the MSHN Region has been scheduled for May 14-16 at MSHN. A Webinar will take place on February 19 12:30-2:30 for those involved in the review. Please plan to attend to obtain needed information for preparation of the review.</li> <li>Sandy to send out Care Alerts for Diabetes Screening with expected follow up by CMHSP within 30 days.</li> <li>Joe W to follow up with Zenith regarding the blank care alert raised dates.</li> <li>BTPRC Data with new template for FY19Q1 due January 31 to Sandy. Sandy to send out definitions by January 31.</li> <li>Sandy to seek information related to a regional survey process.</li> <li>Review Diabetes Monitoring process to prepare for discussion related to barriers and interventions</li> <li>Submit Critical Incidents through REI beginning January 14. Submit prior to January 28th for the January 31 submission.</li> </ul>
✓ KEY DATA POINTS/DATES	Next Meeting: February 28 <sup>th</sup> at Gratiot