

Meeting Date: 4/23/2020 Phone Conference Only

*Attendance by phone

- MSHN – Sandy Gettel*
- MSHN – Sherrie Donnelly*
- Bay – Sarah Holsinger*
- CEI – Elise Magen*
- Central – Kara Laferty*
- Gratiot –Taylor Hirschman
- Huron – Levi Zagorski*
- Lifeways – Gina Costa*
- Montcalm – Sally Culey*
- Newaygo – Andrea Fletcher*
- Saginaw – Julie McCulloch*
- Shiawassee –Becky Caperton*
- The Right Door – Susan Richards*
- Tuscola – Michael Swathwood*

Guests

- CEI – Bradley Allen*

KEY DISCUSSION TOPICS

- 1) Welcome and introductions-
- 2) Review & Approvals
 - a. Approve Agenda
 - b. Approve Minutes
 - c. Review QIC Action Plan (Review follow up actions items)
- 3) Performance Improvement Project (s):
 - a. RSA-Recovery Self-Assessment Provider/Administrator -
 - b. Diabetes Monitoring
- 4) Performance Measurement Updates
 - a. Child and Adult FUH FY20Q1
 - b. Diabetes Screening FY20Q1
 - c. MMBPIS Summary FY20Q1
 - d. Critical Incident Reporting System FY20Q1
- 5) Project Development/Discussion
 - a. Performance Indicator Changes
 - b. Recovery Implementation RAS
 - c. Satisfaction Survey FY20
 - d. Veterans BH-TEDS Data-Narrative
 - e. Policies/Procedures-Regional Oversight
- 7) Site Review Updates
 - a. HSAG PMV Timeline
 - b. MDHHS Waiver Reviews-Contacts/Folders
- 8) MDHHS/MSHN Updates
 - a. MDHHS QIC Updates
 - b. Corona Virus MSHN Website Review
 - c. Accurate Picture Campaign-Process for submitting stories
 - d. Improving Outcomes Conference Schedule Change

✓ KEY DECISIONS

- 2) **Review & Approvals**-Meeting minutes and agenda approved with no changes. Review QIC Action Plan -Highlighted the MMBPIS CAPs that are current and overdue. Upcoming Due dates-BTPRC Data FY20Q2; PMV-Member level detail file; PMV-Mini-ISCATs;
- 3) **Performance Improvement Project (s):**
 - a. RSA-Recovery Self-Assessment Provider/Administrator – Administration time frame May 1 to June 30. Time frame was to allow flexibility for the CMHSPs as a result of the Shelter in Place Executive Order.
 - b. Diabetes Monitoring – Deferred. Review to occur in May and final review in June with Dr. Alavi.
- 4) **Performance Measurement Updates**
 - a. Child and Adult FUH FY20Q1- The standard was met by all CMHSPs.
 - b. Diabetes Screening FY20Q1- No outside standard for this measure. No significant shift in the data. MSHN continues to trend up, however CMHSPs should review individual data for any potential issues.

	<p>c. MMBPIS Summary FY20Q1-MSHN met the standard for all indicators except Indicator 3-Start of Service within 14 days. This has not been met for 4 out of the previous 5 quarters. Causal factors include inadequate documentation to support the disposition and lack of training. Training is currently completed for new employees and as needed based on the data. It is recommended to that CMHSPs consider ongoing training. A regional powerpoint is in development. A recommendation was made for a review of policies and procedures across the region for indicator 10. All CMHSPs required the completion of a CAP for one or more indicators this past quarter.</p> <p>5) Project Development/Discussion</p> <p>a. Performance Indicator Changes- New indicators began April 16th. CMHSPs are working with their Project Manager to address any areas requiring completion.</p> <p>b. Recovery Implementation RAS- The RAS will not be required, however CMHSPs may continue if desired.</p> <p>c. Satisfaction Survey FY20-The MHSIP and YSS will be utilized for Adults with MI and Children with MI. This includes all primary programs as indicated on the Project Description. Method of distribution will allow for alternate methods as a result of the Shelter in Place EO. The options include the following: mailings, electronic, face to face as appropriate, phone calls with a peer or person other than person providing direct treatment. The distribution dates are June 1 - July 30 to allow for flexibility to meet the needs to the organizations. The SUD Provider will administer the MSHN developed SUD Satisfaction Survey June 1 -July 30.</p> <p>d. Veterans BH-TEDS Data-Narrative-Incomplete response choices are being reviewed to determine cause. MSHN will run report next week. Detail will be sent to CMHSPs for review and identification of any causal factors.</p> <p>e. Policies/Procedures-Regional Oversight/MMBPIS-MMBPIS policy updated to include the new indicators. QIC approved the MMBPIS policy. Oversight policies will be reviewed with a plan to approve with recommended changes next QIC meeting.</p> <p>7) Site Review Updates</p> <p>a. HSAG PMV Timeline-Member detail due to MSHN April 27th, Mini ISCATs due April 29th. Both due to HSAG May 1st.</p> <p>b. MDHHS Waiver Reviews-Information will be sent out as it is available. Questions related to the waivers were referred to the COVID FAQs and any additional should be sent to the COVID email for guidance.</p> <p>8) MDHHS/MSHN Updates-</p> <p>a. MDHHS QIC- Next Meeting in June.</p> <p>b. Corona Virus MSHN Website Review-Reviewed website and process for obtaining answers to questions.</p> <p>c. Accurate Picture Campaign-Process for submitting stories.</p> <p>d. Improving Outcomes Conference Schedule Change-The conference has been postponed to July 20-21.</p>
<p>✓ ACTION STEPS</p>	<ul style="list-style-type: none"> • Sandy to complete a draft of Fishbone Diagram for the Diabetes Screening from documentation provided by the CMHSPs on the QIC Action Plan. • Sandy to make updates to the RSA as needed and send out instructions and links. • Sandy to update Consumer Satisfaction Project Description based on QIC discussion and send out. • BH-TEDS veterans data requiring review will be sent out by May 8th for review of “not collected responses”. • Note distribution timelines for the RSA and the consumer satisfaction survey, and complete as indicated.
<p>✓ KEY DATA POINTS/DATES</p>	<ul style="list-style-type: none"> • Next MSHN QIC Meeting: May 28, 2020 via zoom • Next BTPR Work Group: June 12, 2020