

Attendees:		KEY DISCUSSION TOPICS
<ul style="list-style-type: none"> <input checked="" type="checkbox"/> MSHN – Sandy Gettel <input type="checkbox"/> BABH –Sarah Holsinger <input checked="" type="checkbox"/> BABH-Lisa Nagel <input checked="" type="checkbox"/> CEI – Elise Magen <input checked="" type="checkbox"/> CEI – Shaina McKinnon <input checked="" type="checkbox"/> CEI – Bradley Allen <input checked="" type="checkbox"/> CEI – Kaylie Feenstra <input checked="" type="checkbox"/> Central –Kara Laferty <input type="checkbox"/> Central Jenelle Lynch <input checked="" type="checkbox"/> GIHN –Taylor Hirschman <input checked="" type="checkbox"/> GIHN – Pam Fachting <input type="checkbox"/> Huron – Levi Zagorski 	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Lifeways –Phillip Hoffman <input checked="" type="checkbox"/> MCN – Sally Culey <input checked="" type="checkbox"/> MCN- Joe Cappon <input checked="" type="checkbox"/> Newaygo – Andrea Fletcher <input checked="" type="checkbox"/> <u>SCCMH</u> Saginaw-Holli McGeshick <input type="checkbox"/> SCCMH-Bo Zwingman-Dole <input checked="" type="checkbox"/> SHW Amy Phillp <input checked="" type="checkbox"/> SHW –Becky Caperton <input checked="" type="checkbox"/> TBHS – Sheila Canady (Temp) <input checked="" type="checkbox"/> The Right Door- Susan Richards <input checked="" type="checkbox"/> The Right Door –Jill Carter <input checked="" type="checkbox"/> MSHN-Paul Duff 	<ol style="list-style-type: none"> 1. Review & Approvals <ol style="list-style-type: none"> a. Agenda/ Meeting minutes b. Review of follow up action items/QIC action plan 2. Consent Agenda 3. Annual Planning 4. Performance Monitoring 5. Performance/Process Improvement 6. Standing Agenda Items September Meeting Packet

- 1) Review & Approvals
 - a. The August 24th meeting snapshot was approved.
 - b. [QAPIP Workplan FY23](#) – All but one Organization submitted the Satisfaction Surveys results. The FY23Q3 BTPRC Data is due 10/31/2023.
- 2) Consent Agenda-No items in the consent agenda
- 3) Annual Planning
 - a. [QIC Charter](#)-Reviewed the Charter purpose and goals. No changes recommended at this time. Positive feedback received for incorporating the consent agenda and decreasing the meeting to 2 hours. Currently exploring alternative dates for the QIC monthly meeting due to the number of meeting conflicts.
 - b. [QIC Annual Report](#)-Reviewed the change in format, accomplishments for the year, and draft goals and objectives for the FY24 Priorities. Feedback will be accepted on the form and final approval expected to occur in October.
- 4) Performance Monitoring – Discussed regional targeted interventions to address disparities in the 3 measures below. Specifically reviewed those identified in the PIP #1 document. QIC indicated that a process for tracking these interventions was in place. Shiela (TBHS) suggested reaching out to the hospital systems in the region to identify gaps and improvement/interventions. Sandy (MSHN) to follow up with Integrated Care Director.
 - a. FUH Adult and Child / Disparities-
 - b. [PIP #1 Access-Reduction or Elimination of Disparity between the Black/African American and White Population Group.](#)
 - c. PIP# 2 Penetration Rate-Reduction / Elimination of Racial Disparities. Penetration Rate
- 5) Performance/Process Improvement-
 - a. [Critical Incident Reporting\(CIR\)](#)- Reviewed Pilot Status. GIHN and CEI will be reviewing and updating their remediations and additional information request from MDHH. Sandy (MSHN) indicated that currently the PIHP can only see those remediations for incidents in which the PIHP reported. An email was sent to MDHHS requesting information about changes and reporting requirements. Others should check within their organizations to see if anyone has been receiving email notifications for action from MDHHS. A QI Affiliate User Group was developed for REMI Reports, specifically the Critical Incident Standard Report.

	<p>Those who previously had access but due to inactivity access has been disabled will need to follow up using the itsupport@midstatehealthnetwork.org . The Event Reporting Procedure was reviewed. Remediation fields for Emergency Medical Treatment will be added. The Draft will be finalized next month, after clarification about the reporting requirements from MDHHS has been received. Currently waiting for confirmation that Overdose can be reported by the CMHSPs for deaths and emergency medical treatment.</p> <ul style="list-style-type: none"> b. Behavior Treatment-A request to upload the BTPRC data to REMI through the affiliate upload process was reviewed with QIC and will be reviewed with the BTPRC Work Group in October. This process change will eliminate the need to upload to Box and will allow for efficiencies through REMI to include data aggregation and reporting. c. MMBPIS FAQ-Reviewed MMBPIS Project Description FY24 DRAFT. Briefly discussed the MDHHS proposed standards for MMBPIS. The requirements within the contracts have not been updated or published yet. This will be discussed in Oct. <p>6) Standing Agenda Items/Open Discussion-</p> <ul style="list-style-type: none"> a. Customer Services Inquiry for October meeting related to Cultural Competency Requests. Dan Dedloff will be attending QIC in October to discuss the data request and proposed process for Cultural Competence Requests. QIC recommends inviting Customer Service Representatives for the discussion. b. MDHHS QIC Updates -Next meeting is October 4th c. BH-TEDS Updates-Holli reported the BH TEDS specifications and codes sets have been published for FY24. The changes include new fields for juvenile justice and other detailed activity when reporting part-time employment. Legal status is now separated by child/adult data, and will need to be incorporated into the EMR. GIHN had developed a process with PCE. This will be shared with Saginaw and others upon request. Changes will not affect current reporting d. National Core Indicator: The quarterly liaison and NCI Advisory meeting are scheduled for this morning. Those who are leaving QIC to attend will update the group next month.
<p>ACTION STEPS</p>	<ul style="list-style-type: none"> • CMHSP-Review QIC Charter and QIC Annual Report make comments/recommendations on documents for approval in October. • BTPRC Data to be submitted by 10/31/2023 to Box. • CMHSPs to follow up with itsupport@midstatehealthnetwork.org for access to QI Affiliate reports, Critical Incident, through REMI. • CMHSP invite Customer Service Reps for Cultural Competency Discussion in October if desired.
<p>KEY DATA INTS/DATES</p>	<ul style="list-style-type: none"> • MDHHS QIC October 4th 10-12 • Data Analytics -October 11th 1-3 • BHH QI Subgroup – October 10th 1-2 • QIC October 26th 9-11 • CCBHC QI Subgroup October 26th 11-12