

Meeting Date: 11/21/2019

***Attendance by phone**

- MSHN – Sandy Gettel*
- MSHN – Joe Wager
- MSHN – Sherry Donnelly*
- Bay – Sarah Holsinger*
- CEI – Elise Magen*
- Central – Kara Laferty*
- Gratiot –Lynn Charping*
- Huron – Levi Zagorski*
- Lifeways – Gina Costa
- Montcalm – Sally Culey*
- Newaygo – Andrea Fletcher*
- Saginaw – Julie McCulloch*
- Shiawassee –Becky Caperton*
- The Right Door – Susan Richards*
- Tuscola – Jackie Shillinger*

Guests

- CEI – Bradley Allen*
- CEI – Lindsey Michalik*
- Lifeways- Alexis Shapiro
- MSHN – Joe Wager
- MSHN – Kim Zimmerman
- MSHN – Carolyn Watters

KEY DISCUSSION TOPICS

- 1) Welcome and introductions-
- 2) Review & Approvals
 - a. Meeting Minutes,
 - 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 -Identify Regional Interventions
 - b. Diabetes Monitoring (Deferred)
- 4) Performance Measures Updates:
 - a. Priority Measures Performance Report (Deferred)
 - b. Diabetes Screening (Deferred)
 - c. FUH Adult and Child (FY19Q3) (Deferred)
 - d. Behavior Treatment Data-(Nov.FYQ4)
 - f. Critical Incident Summary- (Nov.FYQ3)
 - g. Recovery Self-Assessment Persons in Recovery-Identify Regional Interventions
 - h. National Core Indicator Survey-Identify Regional Interventions (Deferred)
- 5) QAPIP
 - a. QIC Annual Report (Nov.)
 - b. BTPR Work Group Annual Report
 - c. QIC Charter Review (Nov.)
- 6) Project Development/Discussion
 - a. Performance Indicator Changes-Exception Documentation
 - b. Person Centered Planning
 - c. Self Determination
 - d. Independent Facilitation
- 7) Site Review Updates
 - a. HSAG Compliance Review-
 - b. Regional Autism Review-

✓ **KEY DECISIONS**

- 2) Meeting minutes from 10.24.2019 approved
- 3) The following actions to be taken in response to the RSA Summary Report- Discussion related to question 23, 25, 29 all of which were below 3.5. Persons in Recovery is to be defined- Does this include peers who are employed by the CMHSP. Additional discussion to occur at the RCAC, with a review of impact on other questions within the assessment.
- 4d) BTPRC Data reviewed with no trends identified to require action. The following areas that would not be included in the data analysis if the proposed data collection process was approved: specific typed of interventions and length of time of interventions. A suggestion was made to include Autism as a separate group along with the waivers. The report will be reviewed at the next BTPRC Meeting on December 13th.
- 4e) Critical Incident data for FY19Q3 was reviewed. Validation work is in process to ensure that all reported incidents have been received, death categories are consistent, and that a process exist for reporting at each CMHSP. The expectation is to have this completed by 1/15/2020 after the FY19Q4 data is final. Discussion related to sentinel event reporting and the root

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| | <p>cause analysis process. Not all deaths will require a root cause analysis. Some concerns with the short timeframe for determining a sentinel event, with limited information. CMHSPs shared their internal processes. More discussion will occur with critical incident data review.</p> <p>5a) QIC Annual Report reviewed. Feedback to be received by December 2.</p> <p>5b) BTPR Work Group Annual Report Reviewed. This will be reviewed with the BTPR Work Group December 13th.</p> <p>5c) QIC Charter Reviewed. Feedback to be received by December 2nd.</p> <p>6a) Group recommended an additional conference call to discuss the changes and definitions in greater detail. The draft template was approved for use. The Instructions will be reviewed during the conference call. This will be coordinated with QIC. Each CMHSP should coordinate participation with those from their organization.</p> <p>6 b,c,d) Kim Z lead a discussion on the needs of Person Centered Planning, Self Determination, and Independent Facilitation training for the region. Research was completed to determine if any needs or deficits were identified during ongoing site reviews. Some CMHSPs provided information on what was currently occurring related to development or training in these areas, other CMHSPs agreed to have a discussion internally to obtain additional information.</p> <p>7b) Carolynn provided information on the Developments of the Regional Reciprocity Efforts as it related to a collaborative approach to regional autism monitoring. This would result in a more efficient process of monitoring for Autism Providers. Support was verbalized for a regional process, however additional time was requested to review the materials and have internal discussions. Feedback or questions should be sent directly to Carolynn by December 4th.</p> |
| <p>✓ ACTION STEPS</p> | <p>Feedback and information/Questions as it relates to Person Centered Planning, Self f Determination, and Independent facilitation should be sent to Kim. She will discuss with CLC and come back to QIC in the upcoming months.</p> <p>Feedback regarding QIC Annual Report and QIC Charter to be sent to Sandy by December 2nd.</p> <p>Feedback related to the Regional Monitoring of Autism Provider's should be sent to Carolyn Watters Carolyn.watters@midstatehealthnetwork.org by December 4th.</p> <p>Critical Incidents -Provide specific cases to Sandy that were updated to ensure that they are being counted correctly. Lifeways and MSHN to validate counts of death-non suicide to ensure accuracy. CMHSPs should contact Sandy for confirmation of incidents received if counts in the reports are not accurate.</p> <p>Performance Indicators-Sandy to schedule a conference call with QIC to discuss changes in greater detail. CMHSPs should coordinate with internal staff for preferred attendance.</p> |
| <p>✓ KEY DATA POINTS/DATES</p> | <ul style="list-style-type: none"> • Next MSHN QIC Meeting: December 19th, 2019 • Next Regional BTPRC: 12-13-2019 • Next Data Analytics: 12-10-2019 • Next MDHHS QIC: 12-4-2019 |