



Council, Committee or Workgroup Meeting Snapshot

Meeting: Quality Improvement (QI) Council

Meeting Date: 7/22/2021

*Zoom Attendance

- MSHN – Sandy Gettel*
- Bay Arenac –Sarah Holsinger*
- CEI – Elise Magen*
- Central –Janelle Lynch *
- Gratiot – Taylor H*
- Huron – Levi Zagorski*
- Lifeways –Jennifer Wireman*
- Montcalm – Sally Culey*
- Newaygo – Andrea Fletcher*
- Saginaw-Holli McGeshick*
- Shiawassee –Becky Caperton*
- Tuscola – Jackie Shillinger*
- The Right Door- Susan Richards*

Guests

- CEI – Bradley Allen*
- CEI – Shaina Mckinnon*
- CEI – Tonya Seely*
- The Right Door –Jill Carter*
- MSHN SUD – (quarterly)

KEY DISCUSSION TOPICS

- | | |
|--|---|
| <ul style="list-style-type: none"> 1) Welcome and introductions- 2) Review & Approvals <ul style="list-style-type: none"> a. Meeting Minutes/Agenda b. Review follow up action items 3) Performance Improvement Projects <ul style="list-style-type: none"> a. Recovery Self-Assessment (September) b. PIP Topics 4) Performance Measure Updates <ul style="list-style-type: none"> a. Balanced Score Card-deferred b. QAPIP Quarterly Report c. MMBPIS FY21Q1Q2 d. Veterans Narrative FY21Q1Q2 | <ul style="list-style-type: none"> 5) Project Development <ul style="list-style-type: none"> a. Performance Improvement Topic FY22 (June/July) c. Supplement Death reporting d. Veterans Data e. Recovery Self-Assessment f. Behavior Treatment Data Collection 6) MDHHS/MSHN Updates <ul style="list-style-type: none"> a. MiCAL b. HSAG PMV-Preliminary Summary c. HSAG PIP d. HSAG Compliance Review e. MDHHS Follow up Review f. MDHHS QIC Updates g. Opioid Overdose Dashboard h. Outcomes Performance Measures Pilot |
|--|---|

KEY DECISIONS

- 2) Review & Approvals
 - a. Meeting minutes for 6/24/2021 approved with no edits. No additions to the agenda. The Balanced Score Card deferred.
 - b. No outstanding items. Follow up has been completed by all as scheduled and requested.
- 3) Performance Improvement Projects
 - a. Recovery Self-Assessment-Send status for completion to QIC group for needed follow up. Analysis will be completed for September meeting.
 - b. PIP Topics- Current topics include-disparity umbrella, access, engagement, social determinants of health.
- 4) Performance Measure Updates
 - b. QAPIP Quarterly Report-Will be available in meeting folder for review.
 - c. MMBPIS-MSHN met the goal by meeting the standards for each Indicator. Indicator 10 results indicate an increase in CMHSPs that did not meet the standard. QIC members shared interventions that have been successful and those that have not. Those that have been successful have agreed to share the processes and/or documents with others on the council. QIP/CAPs completion has been changed from 30 days following the review of the Performance Report to within 30 days of the submission deadline. The plan will be documented on the QIC workplan and not submitted as a separate plan. Focused webinar trainings was added to the recommendations.
 - d. Veterans Narrative- A narrative report on the comparison findings of the veterans reported on the VSN form and BH-TEDS, including actions taken to improve the quality of the data will be completed and submitted to MDHHS BHDDA is one of the Performance Based Incentive Payment Measures. Action steps have been developed to address any findings.
- 5) Project Development

	<ul style="list-style-type: none"> a. Performance Improvement Topic- See 3b. MSHN waiting for email from MDHHS on Umbrella topic and specifics of HSAG PIP Options. MSHN to complete data exploration for interested topics provided through Medical Directors, QIC, and current performance measures to determine if there is a disparity. QIC will review and finalize topic area. b. Supplemental Death Reporting- Discussion of reporting process including requirements, duplications and value added. Decisions-Immediate notification events will be provided on the excel data collection with all required fields needed for reporting to MDHHS. Supplement death reporting will include a subset of the required data elements (consumer name, date of death, incident type reported, and if it was drug related or COVID was a contributing factor). An aggregate number of sentinel events will be provided each quarter in the same workbook. Exploration will continue to occur using the EMR. Current barriers for use of the EMR include the specifications for the CIRS provided by MDHHS. c. Veterans Narrative- The draft referral process for the VSN from the CMHSP participants was reviewed and accepted by QIC. Discussion included the process for making the referral and tracking the outcome of the individual accepting a referral or declining a referral. The Right Door is currently working with their EMR vendor to develop the field and a process for an output report. Other QIC members supported the efforts and are interested in participating in a joint effort. QIC members shared process/ documents for training on BH-TEDS. Sandy will discuss the process for referrals, expected response time by the MSHN VSN, and process for receiving the number of declines from the CMHSPs. The MSHN VSN will be invited to attend the August QIC for finalization of the process. d. Recovery Assessment Scale - Deferred e. Behavior Treatment Data Collection -QIC reviewed current data collection and identified barriers for completion. A new data collection form will be developed based on the barriers and the BTPR Work Group feedback. QIC to review next month. <p>6) MDHHS/MSHN Updates</p> <ul style="list-style-type: none"> a. MICAL-General discussion of use and confusion associated with the intention of the current project. Implementation has been postponed. This will stay on the agenda for continued discussion if needed. b. HSAG PMV-Preliminary Summary-HSAG review was completed. Areas of concern with the process for the source code review were identified and include the request of additional code related to the previous year's documents, not current year; and the lack of approval for those indicators that were approved the previous year. Draft Report will be provided in September. Additional validation occurred for the primary source verification. Findings are unknown at this time. c. HSAG PIP-Draft Validation Report received. A status of "Met" was received with a 100% for critical elements and 95% for other elements. The general comments and partial finding will be addressed and resubmitted by August 13. It is expected this will result in a final score of 100% for both elements. d. HSAG Compliance Review-Review was Monday July 19th. Requested follow up information was submitted yesterday. Draft report will be received in September. e. No additional follow up needed-will be removed from agenda. f. MDHHS QIC is scheduled for August 18th. g. Opioid Overdose Dashboard was shared with council for informational purposes. h. Outcome's Performance Measurement Pilot was postponed and will be removed from the agenda at this time.
ACTION STEPS	<ul style="list-style-type: none"> • MSHN/SG to follow up with MDHHS related to critical incidents/unexpected deaths. • MSHN/SG to create folder for CMHSP to provide MMBPIS materials for sharing and BH-TEDS training materials for sharing. • MSHN/SG to make modifications to the workbook designed to collect supplement death information, immediate notification and sentinel events. • CMHSPs submit BTPR Data by July 31. • MSHN/SG to provide status of RSA submissions
KEY DATA INTS/DATES	<ul style="list-style-type: none"> • QIC-August 26