



Council, Committee or Workgroup Meeting Snapshot
Meeting: Quality Improvement (QI) Council

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| <p>Meeting Date: 12/15/2022</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> MSHN – Sandy Gettel <input checked="" type="checkbox"/> Bay Arenac –Sarah Holsinger <input checked="" type="checkbox"/> CEI – Elise Magen <input checked="" type="checkbox"/> Central –Kara Laferty <input checked="" type="checkbox"/> Gratiot – Taylor Hirschman <input checked="" type="checkbox"/> Huron – Levi Zagorski <input checked="" type="checkbox"/> Lifeways –Phillip Hoffman <input checked="" type="checkbox"/> Montcalm – Sally Culey <input checked="" type="checkbox"/> Newaygo – Andrea Fletcher <input checked="" type="checkbox"/> Saginaw-Holli McGeshick <input checked="" type="checkbox"/> Shiawassee –Becky Caperton <input checked="" type="checkbox"/> Tuscola – Jackie Shillinger <input checked="" type="checkbox"/> The Right Door- Susan Richards | <p>Guests</p> <ul style="list-style-type: none"> <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 Jenelle Lynch <input checked="" type="checkbox"/> The Right Door –Jill Carter* <input checked="" type="checkbox"/> MCN Joe Cappon <input type="checkbox"/> Lifeways –Joshua Williams <input checked="" type="checkbox"/> SCCMH-Bo Zwingman-Dole <input checked="" type="checkbox"/> SHW April Riley <input type="checkbox"/> MSHN Joe Wager | <p align="center">KEY DISCUSSION TOPICS</p> <table border="0"> <tr> <td style="vertical-align: top; width: 50%;"> <ol style="list-style-type: none"> 1. Review & Approvals 9:00 <ol style="list-style-type: none"> a. Agenda/ Meeting minutes b. Review of follow up action items/QIC action plan 2. Consent Agenda 3. Performance Monitoring <ol style="list-style-type: none"> a. MDHHS Waiver Review-CAP b. Veteran Narrative/Utilization FY22Q3/4 4. Annual Planning- <ol style="list-style-type: none"> a. Strategic Planning b. Balanced Scorecard </td> <td style="vertical-align: top; width: 50%;"> <ol style="list-style-type: none"> 5. Performance/Process Improvement <ol style="list-style-type: none"> a. Critical Incident Draft Reporting Population Document b. Committee Council Survey Results 6. Standing agenda items <ol style="list-style-type: none"> a. Organizational Updates b. MMBPIS c. MDHHS QIC d. BH-TEDS </td> </tr> </table> | <ol style="list-style-type: none"> 1. Review & Approvals 9:00 <ol style="list-style-type: none"> a. Agenda/ Meeting minutes b. Review of follow up action items/QIC action plan 2. Consent Agenda 3. Performance Monitoring <ol style="list-style-type: none"> a. MDHHS Waiver Review-CAP b. Veteran Narrative/Utilization FY22Q3/4 4. Annual Planning- <ol style="list-style-type: none"> a. Strategic Planning b. Balanced Scorecard | <ol style="list-style-type: none"> 5. Performance/Process Improvement <ol style="list-style-type: none"> a. Critical Incident Draft Reporting Population Document b. Committee Council Survey Results 6. Standing agenda items <ol style="list-style-type: none"> a. Organizational Updates b. MMBPIS c. MDHHS QIC d. BH-TEDS |
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| <p>KEY DECISIONS</p> | <ol style="list-style-type: none"> 1) Review & Approvals <ol style="list-style-type: none"> a. Meeting minutes for December were approved. No additions to the agenda 2) Consent Agenda- <ol style="list-style-type: none"> a. MMBPIS FDY22Q4 approved. Corrective action / best practice discussion will occur in February. 3) Performance Monitoring <ol style="list-style-type: none"> b. MDHHS Waiver Review- No discussion. c. Veterans Narrative/Utilization FY22Q3/4- Reviewed the Veteran Narrative including the penetration rate of the veterans within the region. 49 individuals were seen by the Veteran Navigator(VN), however, indicated on the BH-TEDS that they were not a veteran. No additional action recommended at this time. Positive feedback received from GIHN regarding the referral process and use of the Veteran Navigator. 4) Annual Planning <ol style="list-style-type: none"> a. Strategic Planning - Began discussion of strengths, weaknesses, opportunities and threats. A request was made for anonymous feedback. If desired, this may be provided to MSHN QM prior to discussion during the next meeting. a. Balanced Scorecard-The Balanced Scorecard for FY22 was reviewed. Updated recommendations for FY23 include the 2 new performance improvement projects, the critical incident measures, and the behavior treatment measure. 5) Performance/Process Improvement- <ol style="list-style-type: none"> a. Critical Incident Draft Reporting Population Document- Reviewed the draft document identifying the population groups for reporting the required events. Action: Clarification related to the population group for the overdoses, deaths, and emergency medical treatment, and the purpose /objectives of the training provided by MDHHS in January and February will be requested from MDHHS. b. Committee/Council Survey Results- The council survey was reviewed. More discussion is needed in February to address specific comments |
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| | <p>Recommendations include:</p> <ul style="list-style-type: none"> • To allow for submission without identifying the CMHSP. • To evaluate/modify the language in the question to be more specific to the council each respondent is representing, not MSHN Councils in general. Comments may not be reflective of the council reviewing the data. • Specific action steps for the council are consistent with previous discussions that occurred during the annual planning. • QIC recommended a hybrid model for meetings. This will include an in-person option quarterly at a centralized location. It is recommended that this be coordinated with the UM/CLC meeting since many of the participants are the same. It was noted that some CMHSPs may choose to participate through video due to the distance. • The questions that demonstrated disagreement were the following: The MSHN Councils/Committees/Workgroup meetings Q1. Achieve the intended purpose. Recommendations: Utilize subgroups for work specific tasks, with recommendations to the full QIC Council. QIC to focus on regional improvements. Began 11/2022 Q2. Are productive and efficient. Recommendations: Utilize a consent agenda for routine data reviews, and informational items. Decrease length of meeting to 2 hours. Began 12/2022 Q3, Materials are received in advance of the meeting at a timeline agreed upon by the committee. Recommendations: MSHN organizational changes should assist with the timeliness of document availability prior to the QIC meeting. Will monitor to ensure documents are received on time. Q6. MSHN is accomplishing needed work efficiently through the councils/committees/workgroups. Recommendations: Utilize subgroups for work specific tasks, with recommendations to the full QIC Council. QIC to focus on regional improvements. Began 11/2022 Q8. I have enough time to contribute to MSHN councils /committees/workgroups. Recommendations: To evaluate charter to insure relevancy with the system transformations such as integrated care, health homes etc. Combine, integrate committees/ councils as needed. <p>6) Standing Agenda Items-No Discussion</p> |
| <p>ACTION STEPS</p> | <ul style="list-style-type: none"> • CMHSP participants submit to the CMHSP External Monitoring Folder using the correct naming convention by 2/17/2023 • MSHN will provide the names of the individuals that reported “not a veteran” in the BH-TEDS and reported being a veteran with the VN. • MSHN to send out template for a guide to drive feedback for informing the Strategic Plan. • MSHN to request clarification related to the population group for the overdoses, deaths, and emergency medical treatment, and the purpose /objectives of the training provided by MDHHS in January and February. |
| <p>KEY DATA INTS/DATES</p> | <ul style="list-style-type: none"> • MDHHS QIC February 1, 10-12 • QIC February 23, 9-11 • CCBHC Subgroup 11-12 |