

Council, Committee or Workgroup Meeting Snapshot

Meeting: Quality Improvement (QI) Council Meeting Date: 3/30/2023

Wieeting Date. 3/30/2023								
Attendees:				Guests		KEY DISCUSSION TOPICS		
			☑ Newaygo – Andrea Fletcher	⊠CEI – Shaina Mckinnon	1.	Review & Approvals		
☑ Bay Arenac –Sarah Holsinger			☑Saginaw-Holli McGeshick	⊠CEI – Bradley Allen		a. Agenda/ Meeting minutes		
□ CEI – Elise Magen			☐ Shiawassee –Becky Caperton	⊠CEI – Kaylie Feenstra		b. Review of follow up action items/QIC action plan		
☐ Central –Kara Laferty				☑ Central Jenelle Lynch	2.	Consent Agenda		
☑ Gratiot – Taylor Hirschman			☑ The Right Door- Susan	☐The Right Door –Jill Carter	3.	Performance Monitoring		
☐ Huron – Levi Zagorski			Richards		4.	Annual Planning		
☑ Lifeways –Phillip Hoffman					5.	Performance/Process Improvement		
☑ Montcalm – Sally Culey					6.	Standing agenda items		
					7.	Open Discussion		
KEY	1)		• •					
DECISIONS			Meeting minutes from February were approved with no edits. No additions to the agenda.					
b. Consent Agenda- No consent agenda								
	2)		Performance Monitoring					
			FUH-Performance Based Incentive Payment Measure. The following actions are occurring for the FUH: data validation, disparity					
		summary for CY22, additional reports being built to support FUH activities. Questions and concerns related to the data in ICDP						
						on has requested a report from ZTS with specific		
						Additional changes to the FUH include changing the		
						vith MDHHS. Paul Duff, Integrated Care Coordinator,		
will be completing the performance summary. The			summary. The performance sumr	nary	will be reviewed and discussed in April.			
			Planning DMC Review-Defer to April/May. In follow up to the Oversight Policy review, a link to the DMC tools will be sent out for review.					
					g. Tr	ne purpose is to discuss solutions to eliminate		
			administrative work identified during the October QIC meeting.					
	b. Satisfaction Surveys – Assessment of member experience is received for all representative population groups. Tools and r were obtained from other states and programs. Considerations for changes include using the MHSIP and YSS for the IDD a SUD populations with minimal word changes, consistent with other states relevant to the target population; having an open							
			• •	•				
			•			website; using additional focused questions for areas		
			·	•		eived from progress notes and periodic reviews for		
			• •			ces, and after services have ended; eliminate additional		
			•	callons to decrease survey fatigu	е ву	incorporating needs to reginal survey; continue to seek		
	outside vendor for administration.					tool to the status of the statewide esticipation surveys		
	Additional information will be obtained, when available, from MDHHS related to the status of the statewide satisfaction surveys for CCBHC.							
			ne use of a modified MHSIP for SUI) will be discussed with the SLID	Tro	atment Team		
	۸۱			will be discussed with the SUD	116	aunon ream.		
	(4)	renomal	nce/Process Improvement-					

	a. Critical Incident Reporting – A draft procedure will be placed in folder for review and approval next month. Steps to improve data accuracy and reconciliation is being completed in coordination with MSHN IT, MDHHS, and PCE.					
	b. PCP QI Team Subgroup-No updates, will resume activities in April.					
	c. RCA Subgroup- Draft form was developed and will be sent out for feedback. Once feedback is received this will be submitted to PCE for development into the EMR.					
	d. FUH Subgroup-Waiting for report development within ICDP for additional analysis of data. The data will be used to support recommendations for additional codes or locations added to the allowable value sets by NCQA or MDHHS based on services provided.					
	e. BTPRC Module Subgroup- No updates. Evaluate purpose and scope during the BTPR workgroup.					
	f. Training Document- The MSHN Standards Training Groups will continue to discuss the training documentation requirements. A draft document has been developed and will be shared for feedback.					
	5) Standing Agenda Items-No Discussion					
	6) Open Items-EMR Platforms- A discussion of shared resources within the PCE systems occurred. This will be an ongoing topic for sharing to assist in eliminating administrative burden across all projects/programs.					
ACTION	MSHN to distribute Draft Critical Incident procedure					
STEPS	RCA subgroup to provide link for RCA form for feedback					
	MSHN to reconvene and send out meeting poll for PCP QI subgroup.					
KEY DATA	QIC April 27, 9-11					
INTS/DATES	CCBHC QI Subgroup April 27, 11-12					