Satisfaction FY26 Process and Documents

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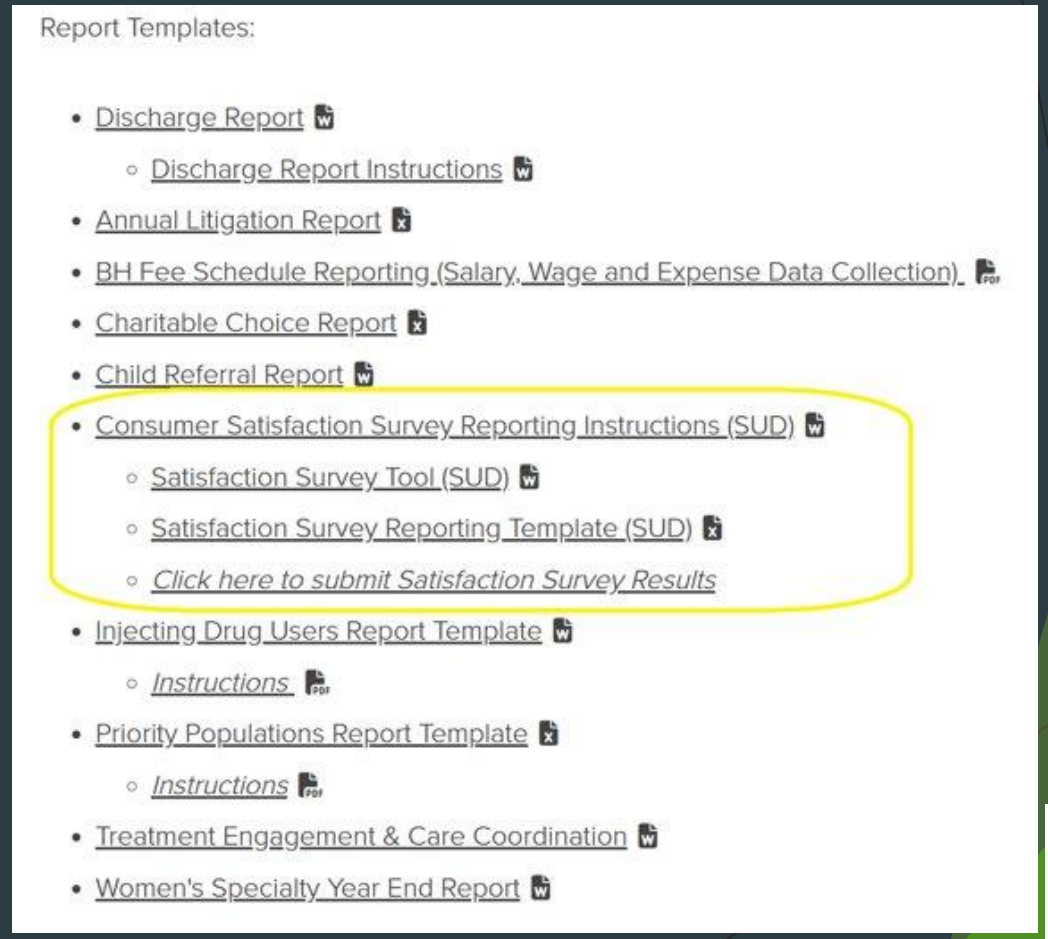
SUD Consumer Satisfaction Survey

- **Satisfaction Survey Dates: June 15th – July 17th 2026**
  - All MSHN funded individuals receiving SUD treatment services during this timeframe should be provided a chance for feedback using the MSHN Satisfaction survey tool
  - Survey tools, instructions and data submission links can be found on the MSHN website under the Reporting Requirements page
  - **Survey Data is due back to MSHN by August 30th, 2026**


Report Templates:

- Discharge Report
  - Discharge Report Instructions
- Annual Litigation Report
- BH Fee Schedule Reporting (Salary, Wage and Expense Data Collection)
- Charitable Choice Report
- Child Referral Report
- Consumer Satisfaction Survey Reporting Instructions (SUD)
  - Satisfaction Survey Tool (SUD)
  - Satisfaction Survey Reporting Template (SUD)
  - *Click here to submit Satisfaction Survey Results*
- Injecting Drug Users Report Template
  - *Instructions*
- Priority Populations Report Template
  - *Instructions*
- Treatment Engagement & Care Coordination
- Women's Specialty Year End Report

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2026 SUD Experience of Care Survey

Survey Distribution Methods

- You may distribute the surveys using any of the following methods:
  - Electronic/web-based survey (MSHN provided link)
  - Mailed surveys (please allow a 4-week return window, so send as soon as possible)
  - Phone surveys
  - Face-to-face surveys
- If using the MSHN electronic survey, the results will come directly to MSHN. MSHN will then share the individualized response data with the organizations provided by the individual after the survey has ended upon provider request
- MSHN will compile regional data for analysis and identification of regional improvement opportunities

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Data Submission (if not using the electronic surveying method)

- Use the FY2026 MSHN SUD Consumer Satisfaction Survey Reporting Template for recording results
- Ensure the file is named appropriately, following this format: **<INSERT PROVIDER NAME> FY2026 SUD Consumer Satisfaction Survey Reporting Template**
- Submit one completed template per MSHN-contracted provider location before August 30, 2026, via the MSHN submission portal: Submit Satisfaction Survey Results

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SUD Consumer Satisfaction Survey

Support and Questions:

For any questions or technical support regarding the survey process or to schedule a one-on-one consultation regarding the survey process, please contact: Kara Laferty, Quality Manager at kara.laferty@midstatehealthnetwork.org

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Critical Incident/Sentinel Event Reporting Training

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Who is responsible for reporting critical/sentinel events?

MSHN delegates responsibility to its Substance Use Disorder Providers, with oversight and monitoring by MSHN, for collecting, analyzing, and reporting all critical (reviewable) incidents for any individual **residing in a 24 hour residential treatment facility.** SUD Providers are responsible for reporting critical incidents to MSHN on a quarterly basis and reviewing all critical incidents to determine whether an incident meets the criteria for a sentinel event.

Events determined to be sentinel events require immediate reporting and notification to MSHN via email at sentinelevents@midstatehealthnetwork.org.

What are Critical Incidents?

All incidents should be reviewed to determine if the incident meets the criteria and definition for a sentinel event.

The outcome of the review should result in a classification of each critical incident as a:

a) Non-sentinel event or

b) Sentinel event

The following incidents are considered critical incidents and are required to be reviewed to determine if they are sentinel events:

- Death of a recipient
- Serious illness requiring admission to a hospital
- Alleged cause of abuse or neglect
- Accident resulting in injury to recipient requiring emergency room visit or hospital admission
- Arrest and/or conviction
- Serious challenging behaviors
- Medication error

What is a Sentinel Event?

A sentinel event is a Patient Safety Event that reaches a patient and results in any of the following:

- Death (which is not by natural cause or does not occur as a natural outcome to a chronic condition (e.g. terminal illness) or old age)
- Permanent harm
- Severe temporary harm and intervention required to sustain life
- An event can also be considered sentinel event even if the outcome was not death, permanent harm, severe temporary harm and intervention required to sustain life (when in doubt, reach out to MSHN for confirmation of whether an incident would meet sentinel event criteria)

The provider must determine whether an incident meets criteria for a sentinel event within three (3) business days of incident occurrence. If classified as a sentinel event, a root cause analysis must be initiated by the provider within two (2) additional business days.

- Events determined to be sentinel events require a provider's immediate notification to MSHN via email to the MSHN Sentinel Event distribution list, sentinelevents@midstatehealthnetwork.org.
- Additionally, deaths of recipients (regardless of cause) and all administrations of Narcan should be reported within 48 hours to MSHN via email to sentinelevents@midstatehealthnetwork.org.

Additional Sentinel Event Information

- Deaths as a result of suspected staff action or inaction, or any death that is the subject of a recipient rights investigation, licensing, or police investigation requires additional information to be submitted to sentinelevents@midstatehealthnetwork.org for reporting to MDHHS. The additional information must include the following:

  - Name of beneficiary
  - Beneficiary ID number (Medicaid ID/MIChild ID)
  - Consumer ID if there is no beneficiary ID number.
  - Date, time and place of death (if a licensed foster care facility, include the license #)
  - Preliminary cause of death
  - Contact person's name and E-mail address.

How to report:

SUD Providers shall submit critical incidents through direct entry into REMI (MSHN's Information Management System). The form includes the collection of the following information:

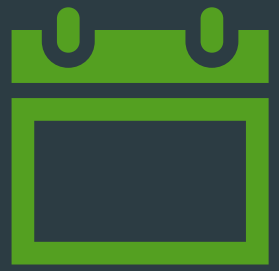
- Consumer: Lookup the consumer who had the critical incident occur to enter their consumer ID/name into this field
- Incident Date: Date the incident occurred
- Incident Type: Select the critical event type from the dropdown of the incident type based on MDHHS Critical Incident Reporting and Event Notification and MSHN policy guidelines
- Sentinel Event (Yes/No): Determination from the provider as to whether this is a sentinel event that meets sentinel event criteria as defined by MDHHS
- Date Determined to be Sentinel: Date that the incident was determined to be sentinel after review by the provider (determination must be made within 3 business days of incident occurrence)
- Date Root Cause Analysis (RCA) Process Began: This is the date that the RCA began after determination the incident was sentinel (an RCA must be initiated by the provider within 2 business days after an event is classified as a sentinel event)
- Required Action Resulting from Root Cause Analysis: What follow-up activities and actions were implemented to ensure that future reoccurrence of this incident does not occur
- Contact Person: Include the name of the organization's contact person related to critical incidents. This person must be able to provide or obtain information related to any follow-up questions about the incident
- Contact Person Phone Number: Include the phone number of the previously identified contact person for the incident
- Notes: All incidents must have notes which indicate detailed information relating to the incident to describe what occurred and any follow-up that took place. Please use the consumer initials/incident date when describing detailed information of the incident in the notes section for tracking purposes

When to report:

The data collection form for critical incidents will be due the 15th of the month following the end of each quarter within REMI:

- FYQ1-January 15th
- FYQ2-April 15th
- FYQ3-July 15th
- FYQ4-October 15th

- **Please note the additional fields the SUD Provider must track/document within quarterly reporting for all events determined to be sentinel:**
  - The date the critical incident was determined to be sentinel
  - The date the RCA commenced and was completed
  - Actions taken to remediate the event and prevent recurrence of future events



Root Cause Analysis

An "appropriate response" to a sentinel event *includes a thorough and credible root cause analysis, implementation of improvements to reduce risk of reoccurrence and monitoring of the effectiveness of those improvements*

The SUD Provider must commence a root cause analysis (RCA) within 2 subsequent business days of the determination of a sentinel event. An RCA is a problem-solving method used to identify the root causes of incidents and implement improvements to prevent future recurrence. An RCA must include the following elements:

- Formalized team response that stabilizes the individual served, discloses the event to the individual served and family, and provides support for the family as well as staff involved in the event
- Notification of organization leadership
- Immediate investigation
- Completion of a comprehensive systematic analysis for identifying the causal and contributory factors
- Strong corrective actions derived from the identified causal and contributing factors that eliminate or control system hazards or vulnerabilities and result in sustainable improvement over time
- Timeline for implementation of corrective actions
- Systemic improvement with measurable outcomes

Additional Definitions- Critical Incidents Types

Death: That which is not by natural case or does not occur as a natural outcome to a chronic condition (i.e. terminal illness) or old age.

- Unexpected deaths include deaths that resulted from suicide, homicide, an undiagnosed condition, were accidental, or were suspicious for possible abuse or neglect.
- A reminder that deaths as a result of staff action or inaction, or subject to a recipient rights investigation, licensing, or police investigation requires additional information to be submitted to the email **sentinelevents@midstatehealthnetwork.org.** Additional information required includes the following:
  - Name of beneficiary
  - Beneficiary ID number (Medicaid/MIChild)
  - Consumer ID (COND) if there is no beneficiary ID number.
  - Date, time and place of death (if a licensed foster care facility, include the license #)
  - Preliminary cause of death
  - Contact person's name and E-mail address.

Additional Definitions- Critical Incidents Types

- **Serious/physical illness resulting in admission to a hospital**: This does not include planned surgeries, inpatient or outpatient. It does not include admission to hospital directly related to the natural course of the persons chronic illness, or underlying condition
- **Injuries requiring emergency room visit or hospital admission:** In many communities where hospital do not exist, medi-centers and urgent care clinics/centers are used in place of hospital emergency rooms and should be included in the reporting. Accidents resulting in injury to recipient requiring emergency room visit or hospital admission result in death or loss of limb or function and which required visits to emergency rooms, redi-med centers and urgent care clinics/centers and/or admissions to hospital should be considered a sentinel event
- **Behavioral episode:**-Serious challenging behaviors are those not already addressed in a treatment plan and include significant (in excess of $100) include property damage, attempts at self-inflicted harm or harm to others, or unauthorized leaves of absence. All unauthorized leaves from residential treatment are not sentinel events. Serious physical harm is defined by the administrative rules for Mental Health(300.7001) as physical damage suffered by a recipient that a physician or registered nurse determines caused or could have caused the death of a recipient, caused the impairment of his or her bodily functions, or caused the permanent disfigurement of a recipient." Any serious challenging behavior that results in death or loss of limb or function to the individual or risk thereof is considered a sentinel event
- **Arrest and/or conviction:** Occurs during the course of treatment. Count arrests and convictions as separate incidents
- **Medication error:** Means a) wrong medication; b) wrong dosage; c) double dosage; or d) missed dosage which resulted in death or loss of limb or function or the risk thereof. **It does not include instances in which consumers have refused medication**

Critical Incidents and Sentinel Events

Support and Questions:

For any questions relating to SUD critical Incident submissions or sentinel event notifications please contact: Kara Laferty, Quality Manager at kara.laferty@midstatehealthnetwork.org

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