



Council, Committee or Workgroup Meeting Snapshot

Meeting: Quality Improvement (QI) Council

Meeting Date: February 22, 9:00-12:00

Attendees:

- MSHN – Sandy Gettel
- MSHN- Amy Dillon
- MSHN-Bria Perkins
- MSHN-Kim Zimmerman
- BABH –Sarah Holsinger
- CEI – Elise Magen
- CEI – Shaina McKinnon
- CEI – Bradley Allen
- CEI – Kaylie Feenstra
- Central –Kara Laferty
- Central -Jenelle Lynch
- GIHN –Taylor Hirschman
- Huron – Levi Zagorski

- Lifeways –Phillip Hoffman
- Lifeways-Emily Walz
- MCN – Sally Culey
- MCN- Joe Cappon
- Newaygo – Andrea Fletcher
- SCCMH- Saginaw-Holli McGeshick
- SCCMH-Bo Zwingman-Dole
- SHW-Amy Phillips
- SHW- Becky Caperton
- TBHS – Josie Grannell
- TBHS- Sheila Canady (Temp)
- The Right Door- Susan Richards
- The Right Door –Jill Carter

KEY DISCUSSION TOPICS

1. Review & Approvals
2. Consent Agenda
3. Performance/Process Improvement
4. Annual Planning
5. Standing Agenda Items
6. CCBHC 11:00-12:00
[February meeting Packet](#)

- 1) Review & Approvals (9:00)
 - a. January meeting minutes approved.
 - b. No additions to the agenda.
- 2) Consent Agenda-(9:05) Consent agenda items approved with no discussion.
 - a. Event Reporting Procedure-**Approved**
 - b. FY 24Q1 Compliance, CS, MEV, Quality Department Report-Review/No action required.
 - c. MSHN Health Equity Analysis REACH Nov 2023 -Informational/No action required.
 - d. MSHN Behavior Treatment Review Data FY24Q1 (BTPRC review 2/9/2024)-Review/No action required.
 - e. QAPIP Documents-Board Approved-Distribute to provider.
 - f. Compliance Summary Report 2023
- 3) Performance/Process Improvement-(9:10)
 - a. [CMHSP Site Review Process](#)-Amy D provided information related to the new process for the CMHSP site reviews and answered questions related to the process. The reviews scheduled for 2024 include only MEV. The DMC review will include a sample of the MDHHS Waiver Review selection provided by MDHHS. Policies/procedures required for the MDHHS Administrative review will be requested from the CMHSPs. The attestation will be specific to the DMC reviews every three years. The record documentation worksheet previously used to identify the location of the document will not be used. The chart review tool will be used by MSHN for a sample of the MDHHS records selected. Additional instructions and guidance will be forwarded to the clinical team for discussion in the waiver workgroups. QI reps responsible for the coordination of the site review will be included in the

	<p>communications. Emails will be sent with needed information and additional meetings with the site review team will only occur if needed.</p> <ul style="list-style-type: none"> b. Medicaid Event Verification Annual Report – Bria P presented the MEV Annual report with recommendations for improvement. c. Same day access-CMHSPs who do not currently have same day access were seeking information about the process from those that were currently offering same day access. Seven CMHSPs shared their process. Lifeways, CEI, Central, MCN had an initial screen and walk in appointments available for assessments. SCCMH and The Right Door had scheduled open times for assessments. Variances in the process were discussed such as the use of the H0002 for the initial screen, scheduled open time with staff who have assigned caseloads, staff dedicated to the walk in clinics, and the use of the initial screen to populate the assessment or needed updates to the assessment if a full assessment was completed within the previous year. d. NCQA Public Comment – Discussed the site navigation and difficulty with links that some were experiencing. e. QI Team Updates- <ul style="list-style-type: none"> i. Satisfaction Survey-Reviewed the charter document. QI team will approve final document. Levi Z, Josie G, Joe C volunteered to participate in the QI Team for the satisfaction survey process. 1st meeting is scheduled for 2/27/2024. <p>4) Annual Planning.</p> <ul style="list-style-type: none"> a. Satisfaction Survey Dates-Review Project Description Changes. Satisfaction Survey QI Team will recommend changes in March. b. Update Contact Lists- <p>5) Standing Agenda Items/Open Discussion-10:00</p> <ul style="list-style-type: none"> a. MDHHS QIC Updates –CRM Critical Incidents process issues discussed. b. PIHP Quality Workgroup (Sandy)- No updates. c. Site Review updates/reports-See FY24 review tools in meeting packet folder. See above 3.a. d. External Quality Review updates/reports (Amy)-Reviewed the types of HSAG surveys and tentative dates based on previous reviews. e. Customer Services Committee (Dan)-No updates f. BH-TEDS Updates(Holli)- No updates g. National Core Indicator Advisory Council-(Andrea)- No Updates h. Conferences/Trainings (All)-Discussed potential topics for the IO conference. Kara (CMCMH)volunteered to sit on a panel to discuss the process used to evaluate their system for efficiencies and changes made. This will be further explored with the planning committee. <p>6) CCBHC-Agenda Draft-11:00</p>
ACTION STEPS	<ul style="list-style-type: none"> • CMHSP update contact list • CMHSP MMBPIS due <u>March 15</u>
KEY DATA INTS/DATES	<ul style="list-style-type: none"> • MDHHS QIC-April 3, 10-12 • MSHN QIC- March 28, 9-11 • BHH QI subgroup March 6, 1-2 • CCBHC March 28, 11-12

