

Meeting Date: 12/15/2022

- MSHN – Sandy Gettel
- Bay Arenac –Sarah Holsinger
- CEI – Elise Magen
- Central –Kara Laferty
- Gratiot – Taylor Hirschman
- Huron – Levi Zagorski
- Lifeways –Phillip Hoffman
- Montcalm – Sally Culey
- Newaygo – Andrea Fletcher
- Saginaw-Holli McGeshick
- Shiawassee –Becky Caperton
- Tuscola – Jackie Shillinger
- The Right Door- Susan Richards

Guests

- CEI – Shaina Mckinnon
- CEI – Bradley Allen
- CEI – Kaylie Feenstra
- Central Jenelle Lynch
- The Right Door –Jill Carter*
- MCN Joe Cappon
- Lifeways –Joshua Williams
- SCCMH-Bo Zwingman-Dole
- SHW April Riley
- MSHN Joe Wager

KEY DISCUSSION TOPICS

1. Review & Approvals 9:00
 - a. Agenda/ Meeting minutes
 - b. Review of follow up action items/QIC action plan
2. Consent Agenda-
3. Performance Monitoring
 - a. MDHHS Waiver Review-CAP
4. Annual Planning-
 - a. Policy/Procedure- Review/Approval
 - b. QAPIP Plan
 - c. QAPIP Report
5. Performance/Process Improvement
 - a. Root Cause Analysis Subgroup Updates
 - b. FUH Subgroup Updates
6. Annual Planning
 - a. Policy & Procedure Review approval
 - b. QAPIP Plan/Report
7. Standing agenda items
 - a. Organizational Updates
 - b. MMBPIS
 - c. MDHHS QIC
 - d. BH-TEDS

KEY DECISIONS

- 1) Review & Approvals
 - a. Meeting minutes for November 17th approved. No additions to the agenda
- 2) Consent Agenda-
 - a. Critical Incident Review was removed from the consent agenda for discussion.
 - b. BTPR Performance summary-approved
 - c. Quality Policies and Procedures approved.
- 3) Performance Monitoring
 - a. MDHHS Waiver Review-The appeal was dismissed by MDHHS as a result of incorrect process followed. MSHN CEO requested a meeting with MDHHS to resolve the reasons for the appeal. This topic will be placed on the Ops Council agenda for discussion with the CMHSP Directors. MSHN QM followed up with lead reviewer for clarification related to the CAP since reason for appeal has not been resolved. Guidance from MSHN to the CMHSPs is to wait until resolution if obtained before making any systemic changes.
 - b. Critical Incident Performance Summary- Incidents submitted are reviewed for face validity. If there are any questions this is discussed with the CMHSP prior to submission. The CMHSP should ensure no duplicates etc. are present prior to submission. Data submitted through December 31 for FY22, will be incorporated into the FY23Q1 review summary
- 4) Performance/Process Improvement-
 - a. RCA Subgroup- Group meeting tomorrow-No updates
 - b. FUH Subgroup- Meeting will be scheduled. A contact for NCQA was received via webinar provided by MIHIN.
 - c. PCP QI Subgroup- Names for individuals to participate are to be submitted by 12.20.2022. A meeting will be scheduled once all have been received.

	<p>d. BTPRC Workgroup/Module Subgroup Report-No updates. Renee Rausch is leading the group</p> <p>e. Meeting Structure- Consensus was obtained to include a quarterly face to face meeting option with continued use of zoom for those that are unable to attend face to face. Arrangements will be made with Gratiot consistent with pre COVID. Additional discussion about moving the meeting to other locations around the state to allow others to join without extensive travel time. Will seek volunteers in future meetings.</p> <p>f. The QIC action plan will continue to be used with due dates. A master schedule for each month will be used to assist in managing the projects.</p> <p>6) Annual Planning</p> <p>a. QAPIP Plan/Report- The QAPIP plan and report will be reviewed and approved by Operations Council December 19th.</p> <p>7) Standing Agenda Items</p> <p>a. Promotions and Job Postings-The new Compliance Administrator position has been filled by Amy Dillon, who will be invited to QIC to continue the discussion related to the oversight and monitoring from November issues and recommendations. The UM Administrator has been filled by Cammie Myer. Both of their previous jobs have been posted on the website.</p> <p>b. No discussion related to MMBPIS</p> <p>c. Review meeting minutes from the MDHHS QIC. -BH Core Measures will be required in 2024. MSHN QM is making a list of required measures across the various service programs. The Right Door Has been accepted into the PCP Learning Community and will provide relevant updates.</p> <p>d. No Updates</p>
ACTION STEPS	<ul style="list-style-type: none"> • CMHSP submit names for PCP QI Team by 12/20/2022 • MSHN to schedule meetings for PCP QI Team and FUH subgroup
KEY DATA INTS/DATES	<ul style="list-style-type: none"> • QIC January 26 9-10 • CCBHC Subgroup 10-11 • NCI Meeting 11-12