

Meeting Date: 1/28/2021

- MSHN – Sandy Gettel*
- MSHN – Sherrie Donnelly*
- Bay Arenac –Sarah Holsinger*
- CEI – Elise Magen*
- Central – Kara Laferty
- Gratiot –Pam Fachting
- Huron – Levi Zagorski*
- Lifeways –Phillip Hoffman*
- Montcalm – Sally Culey*
- Newaygo – Andrea Fletcher*

***Attendance by phone**

- _Saginaw-Holli McGeshick*
- Shiawassee –Becky Caperton*
- Tuscola – Jackie Shillinger*
- The Right Door- Susan Richards*
- Guests**
- CEI – Bradley Allen*
- CEI – Shaina Mckinnon*
- The Right Door – Jill Carter*
- Tuscola – Denny Henige*
- Central – Renee Rausch*
- Central – Cindy Bay-Barron*
- Huron Jill Rowland

KEY DISCUSSION TOPICS

- 1) Welcome and introductions-
- 2) Review & Approvals
 - a. Meeting Minutes/Agenda
 - b. Review follow up action items
- 3) Performance Measure Updates
 - a. MMBPIS FY20Q4
- 4) QAPIP
 - a. QAPIP Annual Report
 - b. Annual Reporting/Data Review Schedule
 - c. QAPIP Annual Plan
- 5) Project Development
 - a. Recovery Assessment Scale
 - b. Performance Bonus Measures
 - Veterans Service Navigator
 - FUH Health Disparities

✓ **KEY DECISIONS**

- 2) Review & Approvals-Meeting Minutes from 12/9/2020 approved. Agenda for 1/28/2021 approved with no changes.
- 3) Performance Measure Updates
 - a. MMBPIS – FY20Q4 data was reviewed. MSHN met the standard for each indicator for FY20Q4. Six CMHSPs did not meet the standard in one or more indicators. Additional analysis for Indicator 10-Readmissions within 30 days of Hospitalization measure which incorporated feedback from the Regional Medical Directors meeting was reviewed. Additional steps include interventions at the local level, and additional data analysis to identify regional trends to occur at regional level. CMHSPs shard current processes for coordination. QIC recommended the addition of “unable to be reached” to the reasons for being out of compliance with the indicators. The instruction will be updated and sent out to group.
- 4) Quality Assessment Performance Improvement Program
 - a. QAPIP Annual Report – Annual Report and recommended priorities for FY21 were reviewed and approved by QIC.
 - b. Annual Reporting/Data Review Schedule-Annual reporting and data review schedule will be updated to be consistent with the QAPIP Work Plan.
 - c. QAPIP Annual Plan (Workplan)-Reviewed and approved the QAPIP annual Plan and Work Plan for FY21.
- 5) Project Development
 - a. Recovery Assessment Scale-Draft Project Description was reviewed for feedback. Two CMHSPs are exploring the use of the DLA 20. The DLA-20 is used for level of care and outcomes for all populations. The tool will be compared to the current tool for assessment of recovery. More discussion next month.
 - b. Performance Bonus Measures-The requirements for the following performance bonus incentive measures were reviewed. Discussion related to the areas that will include QIC were discussed.
Veterans Service Navigator (VSN)- The QAPIP Work Plan includes objectives to improve the quality of the veteran’s data and military fields, identifying action steps for areas of discrepancy.
FUH Health Disparities-Health disparities and MHP data will be added to the FUH project description and quarterly summaries.
- 6) MDHHS/MSHN Updates
 - a. MDHHS QIC Updates-Provided information on the changes and link for the MDHHS Comprehensive Quality Strategy. This will be discussed at the next MDHHS QIC Meeting.

	<p>b. Council/Committee Survey-Reviewed the results of the survey. Recommendations include connection with other committees (particularly Provider Network Management) including feedback to QIC to close the loop; materials to be provided further in advance to ensure time for reviewing. Project development to include a skeleton document by MSHN with QIC to further develop utilizing experience and knowledge of the CMHSPs. Participation, use of video, and ability to cover the material has demonstrated improvement since QIC made changes last November.</p>
<p>✓ ACTION STEPS</p>	<ul style="list-style-type: none"> • CMHSPs to submit improvement plans as required. • Sandy to update MMBPIS Project Instructions • MSHN to complete additional analysis related to Indicator 10 to identify regional trends. • Sandy to complete comparison of DLA-20 and Recovery Assessment • Email discussion of current VNS activity at the CMHSPs.
<p>✓ KEY DATA POINTS/DATES</p>	<ul style="list-style-type: none"> • MSHN QIC Meeting: 2.25.2021 • MDHHS QIC Meeting: 2.3.21 • BTPR Work Group: 2.12.21 • Data Analytics:2.9.2021