

Meeting Date: 11/18/2021

**\*Zoom Attendance**

- MSHN – Sandy Gettel\*
- Bay Arenac –Sarah Holsinger\*
- CEI – Shaina Mckinnon\*
- Central –Kara \*
- Gratiot – Taylor Hirschman\*
- Huron – Levi Zagorski\*
- Lifeways –PJ 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\*
- The Right Door –Jill Carter\*
- MSHN SUD – (quarterly)
- GIHN Pam Fachting
- MCN Joe Cappon
- BABH Melissa Deual
- Lifeways –Cindy Keyes
- SCCMH-Bo Zwingman-Dole
- TBHS- Lindsay Harper
- CEI – Tonya Seely\*

**KEY DISCUSSION TOPICS**

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| <ul style="list-style-type: none"> <li>1) Welcome and introductions-</li> <li>2) Review &amp; Approvals               <ul style="list-style-type: none"> <li>a. Meeting Minutes/Agenda</li> <li>b. Review follow up action items</li> </ul> </li> <li>3) Performance Improvement Projects               <ul style="list-style-type: none"> <li>a. PIP #1 Penetration Rate-Study Question/Design</li> <li>b. PIP #2- Confirm Topic-Study Question</li> </ul> </li> <li>4) Performance Measure Updates               <ul style="list-style-type: none"> <li>a. BTPR FY21Q4</li> <li>b. Critical Incidents FY21Q4/FY21 December</li> <li>c. MMBPIS FY21 Q3</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>5) Project Development               <ul style="list-style-type: none"> <li>a. Behavior Treatment Data Collection</li> <li>b. Annual Satisfaction Survey Project Description Review (Dan)</li> </ul> </li> <li>6) QAPIP-Deferred to December</li> <li>7) MDHHS/MSHN Updates               <ul style="list-style-type: none"> <li>a. Announcements-VSN</li> <li>b. DMC Interim Review</li> <li>c. MDHHS Follow Up Review Waiver Review – PCP Training Process Discussion</li> <li>d. MDHHS QIC Updates -New structure/agenda</li> <li>e. National Core Indicator Work Sheet</li> <li>f. MSHN Website - Corona Virus MSHN</li> </ul> </li> </ul> |
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**KEY DECISIONS**

- 2) Review & Approvals
  - a. Meeting minutes for 10/28/2021 approved with no edits. No additions to the agenda.
  - b. Agenda Approved/Follow up- December meeting changed to December 20.
- 3) Performance Improvement Projects (PIP)
  - a. PIP #1 Penetration Rate-Study Question/Design. Approved by Operations Council in November. QIC established the following Study Topic and Study Question for further development and submission to HSAG June 30<sup>th</sup>:
    - Study Topic: The rate of racial or ethnic disparities for Medicaid recipients having received PIHP managed services.
    - Study Question: Do the targeted interventions reduce or eliminate the racial or ethnic disparities in the penetration rate between the minority penetration rate and the index (white) penetration rate?
  - b. PIP #2- QIC chose Option 2 by majority rule with one vote per CMHSP. The Topic and Study questions for PIP #2 are the following:
    - Study Topic: The percentage of new persons during the quarter starting any medically necessary on-going covered service within 14 days of completing a non-emergent biopsychosocial assessment.
    - Study Question: Do the targeted interventions increase the percentage of new consumers who start a medically necessary ongoing covered service within 14 days of completing a non-emergent biopsychosocial assessment.
- 4) Performance Measure Updates
  - a. BTPR FY21Q4 -No discussion. Will be reviewed by the BTPR Work Group and CLC next month.
  - b. Critical Incidents FY21Q4/FY21 – December
  - c. MMBPIS FY21 Q3-Distributed in October. No follow up discussion.
- 5) Project Development
  - a. Behavior Treatment Data Collection-The revised document was reviewed with QIC. Outstanding questions were answered.
    - Question: Should the intervention be reported based on the date of the incident or the date the intervention was reviewed at the committee. Answer: A decision was made to report the date the incident/intervention occurred.
    - Question: Should the number of restrictive and intrusive interventions include those that are written in the plan, or those that occurred?

	<p>Answer: Intrusive and Restrictive interventions that are written into the plan, not the frequency in which they occurred. Daily interventions including but not limited to onsite supervision and use of medication may skew the data.</p> <ul style="list-style-type: none"> <li>• Question: Should 911 calls made by staff for behavioral assistance apply to only those that receive 24-hour care and/or CLS services. Or Should this apply to situations when any staff person calls 911 for behavioral assistance such as a therapist who calls 911 for behavioral assistance during a therapy session at the office. (Reference QAPIP, Behavioral Treatment Standards). Answer: This will be referred to the BTPR Work Group and MDHHS Work Group for further interpretation, discussion, and clarification.</li> </ul> <p>b. Annual Satisfaction Survey Project Description Review (Dan)-Reviewed Project Description. The following was discussed</p> <ul style="list-style-type: none"> <li>• Methods of distribution-Recommend the discontinuation of mailed surveys as a result of low return rates. Barriers include- time for change of internal process at the CMHSPs, and increased number of consumers choosing telehealth services. Potential resolutions were contract with an outside organization to compete the survey distribution process, electronic methods for distribution.</li> <li>• Dates of Distribution-Preference is February/March, however, too late to change form mailed surveys this year; If requiring the change continue with the May/June dates this year.</li> <li>• Anonymity – Consensus was to administer the surveys anonymously. More discussion in December and January after follow up related to the potential contract for distribution.</li> </ul> <p>6) QAPIP-Deferred to December</p> <p>7) MDHHS/MSHN Updates</p> <ol style="list-style-type: none"> <li>a. Announcements-VSN began the beginning of November, currently receiving training and orientation. Currently plan to accept referrals in January.</li> <li>b. DMC Interim Review- During the CMH interim review year (2022), we will pull a SEDW, CWP, and Children’s Crisis Intensive Stabilization(CCISS) chart for any CMHSP’s that did not have a review of those charts this year (2021). Awaiting confirmation related to the CISS chart.</li> <li>c. MDHHS Follow Up Review Waiver Review – PCP Training Process Discussion-Overview of the requirements based on the Site Reviewer from 2020. Options such as incentives were discussed. More discussion in December.</li> <li>d. MDHHS QIC Updates -New structure/agenda-The QIC will utilize work groups to address QI Initiatives required by the MDHHS. An update of the workgroup activity will be reviewed each QIC meeting. A topic will be included each meeting for discussion of best practice. Information related to the topic will be received in advance of the meeting.</li> <li>e. National Core Indicator Work Sheet-Reviewed questions provided by MDHHS for preparation to the QIC discussion. CMHSPs shared barriers and limitations of the NCI in addition to the time resource involved with no actionable report available. Concerns related to the time resource required for the sample received. CMHSPs will provide the number in their sample and the number of duplicates from the previous year.</li> <li>f. MSHN Website - Corona Virus MSHN</li> </ol>
<b>ACTION STEPS</b>	<ul style="list-style-type: none"> <li>• CMHSP participants to provide number in NCI survey sample and number of duplicates.</li> <li>• MSHN to seek clarification related to the interpretation of the emergency intervention: Calls to 911 made by staff for behavioral assistance.</li> <li>• MSHN to explore the use of a contractor for Satisfaction Survey Administration.</li> </ul>
<b>KEY DATA INTS/DATES</b>	<ul style="list-style-type: none"> <li>• December meeting was changed to December 20 9-12</li> </ul>