



## Quality Operations Technical Assistance Workgroup Meeting Agenda

Wednesday, April 27, 2022

[Via Zoom Link Platform](#)

9:30 a.m. – 11:00 a.m.

- |       |  |   |
|-------|--|---|
| I.    | Announcements                                      | Tania Greason/April Siebert                 |
| II.   | SUD Update   | Gregory Lindsey                             |
| III.  | Customer Service Update:                           |   |
|       | a. NCIS Survey Update                              | Margaret. Keyes-Howard                      |
|       | b. Peer Support/Mentor Data Collection             | Delora Williams                             |
| IV.   | MDHHS Waiver Full Site Audit Review Update         | Starlit Smith & QI Performance Monitor Team |
|       | • (March 14 – April 22, 2022)                      |   |
| V.    | Critical and Sentinel Event Reporting              | Sinitra Applewhite                          |
| VI.   | PI #2a Update Best Practices (Provider Discussion) | Justin Zeller/Tania Greason                 |
| VII.  | MMBPI “View Only Module”                           | Justin Zeller                               |
| VIII. | Provider Feedback                                  | Group                                       |
| IX.   | Adjournment  |   |



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**Wednesday, April 27, 2022**

Via [Zoom Link Platform](#)

**9:30 a.m. – 11:00 a.m.**

**Note Taker: Aline Hedwood**

**1) Item: Announcements – April Siebert, Director of Quality Improvement**

- DWIHN Virtual job Fair, Thursday April 28, 2022 from 12pm – 2 pm
- DEA National and Prescription Drug Takeback Day Saturday April 30, Samaritan Wellness Center, 5555 Connor Ave, Detroit, MI 48205 inside the Detroit Police Station from 10:00 a.m. – 2:00 p.m.
- Michigan Crisis Intervention (CIT) conference will be held on May 2-3, 2022.
- PCE Mental Health Awareness Fair, Saturday April 30, 2022 at Plymouth Kellogg Park from 10:00 a.m. – 2:00 p.m. free to all ages.
- QI welcome new staff members Melissa Peters, and Delicia Marshall to its performance monitoring team.



**2) Item: SUD Updates – Gregory Lindsey**

**Goal: Review of SUD Updates**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  Quality  Workforce

**NCQA Standard(s)/Element #:**  QI # \_\_\_  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
<p>Gregory Linsey shared the following with the workgroup:</p> <ul style="list-style-type: none"> <li>• The SUD contract amendments were sent out on April 26, 2022 by DWIHN legal dept to providers, if you received a notice please sign your contract ASAP.</li> <li>• All providers must submit an ASAM level of care applications to MDHHS; when sending your ASAM level of care please provide criteria information that support the level of care you are requesting.</li> <li>• Follow Up Action (FUA) when members cases are open to SUD in MH_WIN the ER will contact SUD, and they will have the provider reach out to members if they still require services.</li> <li>• There is state wide initiative to reduce or eliminate Hep-C, SUD has added a HEP-C question to the authorization, if required a referral will be made to have the member tested for HEP-C.</li> <li>• The Active Shooting training will be held on May 4<sup>th</sup>, 2022 from 5:00 p.m. – 7:00 p.m. see Carla Thomas, SUD prevention specialist for registration information.</li> <li>• The Annual Faith Based conference will be held on August 18 &amp; 19, 2022 in conjunction with the Annual Menthol Day.</li> <li>• Fentanyl Awareness Day will be on May 10, 2022 in conjunction with mental health awareness month.</li> <li>• SUD Men Annual Conference scheduled for July 18, 2022.</li> <li>• The Annual SUD Core Accoring Disorder conference scheduled for September 22, 2022.</li> <li>• The Annual Opioid Conference scheduled for July 26 &amp; 27, 2022.</li> </ul>		
Action Items	Assigned To	Deadline
None Required.		



**3a) Item: Customer Service (CS) NCI Survey Update – Margaret Keyes-Howard**

**Goal: Status update of CS NCI Survey**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  **Quality**  Workforce

**NCQA Standard(s)/Element #:** **X QI #5**  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
<p>Margaret Keyes-Howard informed the workgroup that DWIHN’s CS has not received the final NCI report. The NCI survey is due to begin in October or November 2021. Below is a snapshot of NCI survey preliminary results:</p> <ul style="list-style-type: none"> <li>• 83% said during 2021 they talk to a case manager and felt secure in the conversation.</li> <li>• 37% reported being more worried anxious and needed more services.</li> <li>• 51% reported not having access to health provider using telehealth or were not able to go to services where in person service was not offered.</li> <li>• Out of 634 respondents only 89 people reported and 7% of the 89 reported having contracted COVID.</li> <li>• 31% of people in Michigan were using technology.</li> <li>• 6% changed their living residence.</li> <li>• 15% made changes to their home support.</li> <li>• 44% reported not using an in-person BH visit.</li> <li>• 13% not working or quit their job and 5% reduced their work hours.</li> <li>• 55% felt isolated and has visited family less.</li> <li>• 79% stop attending community events and 10% has stopped in person activities.</li> </ul>		
Action Items	Assigned To	Deadline
CS will provide and update the workgroup with the NCI Survey after it is finalized.	CS (Margaret Keyes-Howard)	September, 2022



**3b) Item: CS Peers Support /Mentor Data Collection – Delora Williams**

**Goal: Update for Peers Supports**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  Quality  Workforce

**NCQA Standard(s)/Element #:**  QI # \_\_\_  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
<p>Delora Williams, DWIHN’s Customer Service (CS), will begin to track Peer services and train Peers online. These trainings will help peers improve delivery of services. A letter to the CRSP CEO’s will be distributed asking the QI directors and managers to assist DWIHN with entering accurate Peer contact information in MH_WIN. Also, providers will be required to provide information for Peer certification which will include personal information, address, phone numbers and email addresses. This process will allow for CS to contact Peers for training and also for CS to assist as needed.</p>		
Action Items	Assigned To	Deadline
None Required.		



**4) Item: MDHHS Waiver Full Site Audit Review Update March 14 – April 22, 2022) - Starlit Smith, Administrator & Sara Denney, Clinical Specialist**

- (March 14 – April 22, 2022)

**Goal: Provide Status update**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  Quality  Workforce

**NCQA Standard(s)/Element #:**  QI # \_\_\_  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
<p>The QI team provided a brief summary of DWIHN MDHHS waiver review which began on March 14 – April 22, 2022. There was a total of five focus areas which include administrative policy and procedures, SUD, HAB Waiver, Children, and SED waiver programs. DWIHN received full compliance for SUD standards. Between the three wavier programs a total of 46 clinical records were sampled and 231 staff records including non-professional and professional staff. The reviewer provided positive feedback on DWIHN’s IPOS standardize training meeting all of MDHHS requirements. There were also areas for improvement including repeat citations which will be addressed once DWIHN receives the final report. QI will communicate and request assistance from providers who were involved in the review for development of a POC.</p>		
Action Items	Assigned To	Deadline
<p>QI will require assistance from the required providers for development of POC. Information from the POC will be shared with the QOTAW.</p>	QI Team	May 28, 2022



**5) Item: Critical Event and Sentinel Event Reporting - Sinitra Applewhite, Clinical Specialist**

- **Root Cause Analysis (RCA) Training Wednesday, May 4<sup>th</sup>**

**Goal: Provide status update for RCA requirements and trainings.**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems **X Quality**  Workforce

**NCQA Standard(s)/Element #:** **X QI #1**  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
<p>Sinitra Applewhite shared with the workgroup that QI has completed the standardized Root Cause Analysis (RCA) template and will be providing a provider training on May 4, 2022 from 10:00 am – 11:30 am. It is required that the provider Quality Directors and/or a designee attend. Also, a MH_WIN alert message with the registration information is forthcoming. The implementation will begin May 16, 2022 all CRSP is required to utilize the RCA template. Plans submitted prior to May 16th, will <u>not</u> need to use the new template, if you have any questions or concerns regarding the template please contact Carla, Sinitra, or Micah via email <a href="mailto:cmackey@dwihn.org">cmackey@dwihn.org</a>, <a href="mailto:sapplewhite@dwihn.org">sapplewhite@dwihn.org</a>, and <a href="mailto:milndsey@dwihn.org">milndsey@dwihn.org</a>.</p>		
Action Items	Assigned To	Deadline
<p>Provider CRSP to attend the required RCA training on May 4<sup>th</sup>, 2022. Providers are to reach out to the QI team with additional questions.</p>	<p>CRSP Providers</p>	<p>May 4<sup>th</sup>, 2022</p>



**6) Item: Performance Indicator (PI) #2a Update Best Practice Providers Discussion – Justin Zeller**

**Goal: Review MMBPI #PI (2a) data.**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  **Quality**  Workforce

**NCQA Standard(s)/Element #:** **X QI #4**  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
<p>Justin Zeller discussed with the workgroup an analysis overview for PI# 2a Quarter 1 and Quarter 2 (Preliminary) Quarter 1 MMBPI data was submitted to MDHHS on March 30, 2022. DWIHN and the provider network have been reviewing the data for PI# 2a in which staffing shortages remain the top barrier. DWIHN’s overall compliance rate for Quarter 1 is noted at 52.85%, which is a steady increase from previous quarters. DWIHN’s Quarter 2 preliminary data is noted at 58%, with is also a noted increase with higher performance scores for the I/DD adult and children populations. Currently, there is not a set benchmark from MDHHS for PI# 2a. MDHHS (State) average for Quarter 4 of FY 2021 is noted at 65%. Providers are required to access to the PI module to review their organizations data for trends and to develop action plans. If there are any questions including additional PI Module training, please reach out to Justin Zeller (QI unit) via email: <a href="mailto:jzeller@dwihn.org">jzeller@dwihn.org</a> . QI will share with the workgroup Quarter 1 data results from MDHHS, noting the comparison of the PIHP’s and the states average.</p>		
Action Items	Assigned To	Deadline
<p>QI (Justin Zeller) will share data with the workgroup for PI#2a, including State averages. QI, MCO DWIHN’s Access will continue to meet individually with the CRSP providers to discuss barriers and interventions.</p>	<p>QI, MCO, DWIHN’s Access Teams and the CRSP providers.</p>	<p>Ongoing</p>





**7) Item: Provider Feedback**

**Goal:**

**Strategic Plan Pillar(s):**  Advocacy  Access  Customer/Member Experience  Finance  Information Systems  Quality  Workforce

**NCQA Standard(s)/Element #:**  QI # \_\_\_  CC# \_\_\_  UM # \_\_\_  CR # \_\_\_  RR # \_\_\_

<Notes on discussion>

Discussion/Decisions Made		
<ol style="list-style-type: none"> <li>1. Will the Case Managers quarterly meeting resumé this quarter? <b>Yes, in May 2022</b></li> <li>2. Providers are currently submitting a designation switch package to the Access Center and are requesting more information/training regarding the process. Originally with the designation switch package Access Center told providers it could take up to 30 days for a switch to occur, when submitting the switch package to the Access Center providers currently do not receive confirmation and have to follow-up multiple times which could take 6-8 weeks for completion. Providers feels the client is not receiving services suitable to their conditions.</li> <li>3. Are providers still receiving notification on updated DWIHN polices, <b>Yes Notification is sent for all new policies for Stake Holder feedback.</b></li> <li>4. Is there an updated or new DWIHN Disenrollment policy? <b>Policy is in final stages of review and will be updated and placed on DWIHN’s Website. QI will coordinate with CS to present the policy overview at the June, 2022 QOTAW meeting.</b></li> </ol>		
Action Items	Assigned To	Deadline
QI will reach out Jacqueline Davis, DWIHN Clinical Officer and Yvonne with the providers concerns and set up a meeting and bring that discussion back to this workgroup. CS will present an overview of the DWIHN Disenrollment Policy	DWIHN’s Access Unit	June, 2022

**NEXT MEETING:** Wednesday May 26, 2022 @ 9:30 a.m. – 11:00 a.m. [via Zoom Link Platform](#)

**ADJOURNMENT:** 10:45 a.m.

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