



President and CEO Report to the Board Eric Doeh August 2023

LEGISLATIVE EFFORTS

We are working with our lobbyists, Public Affairs Associates (PAA), as we continue having conversations with legislators and leadership from MDHHS in Lansing surrounding support for DWIHNs Crisis Continuum for persons served throughout Wayne County including step-down long-term care and offering behavioral health interventions for families to connect them with programs and services.

ADVOCACY AND ENGAGEMENT

- Ongoing meetings with MDHHS to discuss procedures and guidelines for our upcoming Crisis Care Center.
- August 2: Youth United participated in the statewide Youth MOVE Michigan Summit, designed for youth ages 14 – 25 focusing on topics and issues on how to best navigate in today’s world and prepare them for a successful future.
- August 10: Transition Age Youth Expo for ages 15-25 offered career and educational options to our young people.
- Aug 14-16: 2023 CIT International 3-Day Conference at Detroit Marriott RenCen, designed to explore the importance of implementing crisis intervention strategies into everyday work practices for providers and community members.
- August 18: DWIHN’s Annual Back to School Bash in Redford. We will give away over 1,000 backpacks for youth K-12. In addition, there will be free games, activities, crafts, dental cleanings, food, and resources.
- August 18: DWIHNs “Ready, Set, Succeed: Back to School Festival” at The Corner Ballpark in Detroit will host inspiring speakers, workshops, art shows from local vendors, giveaways for students and much more.

INTEGRATED HEALTH REPORT

The Detroit Wayne Integrated Health Network (DWIHN) continues to make progress with integrating with Medicaid Health Plans. Below is a list of updates of the collaborations with Medicaid Health Plan Partners One, Two, and Three.

Health Plan Partner One

Health Plan 1 invited a representative from DWIHN to sit in on their consumer advisory committee. IHC will be present for these meetings. Health Plan 1 currently is having difficulty with staffing and hired an individual in the end of July. DWIHN staff will work with the new staff on how to use the shared platform and add more members for care coordination.

DWIHN and IHC meet monthly for care coordination. Two members had gaps in care. The two members required coordination with their assigned CRSP, both members were connected.

Health Plan Partner Two

Care Coordination with Health Plan 2 was initiated in September 2020, these meetings occur monthly. Health Plan 2 had seven members identified of having gaps in care. All seven members needed assistance with connecting to their assigned CRSP. Two of the seven members needed assistance with the FUH appointment. This appointment was obtained and member was satisfied.

Health Plan 2 and DWIHN IHC directors and managers have a meeting in August to go over data and HEDIS scores.

Health Plan Partner Three

DWIHN staff are working with Health Plan 3 on a new project of monitoring individuals who utilized the emergency room department or inpatient psychiatric unit and how to perform data sharing.

There are 4 CRSP's in the pilot: Neighborhood Services Organization, Lincoln Behavioral, Hegira and Guidance Center. This started on June 16, 2022.

Baseline data was completed March from Health Plan 3 but it was discovered that there was not data on the DWIHN side to see if it matched. PCE has created a radio button in each CRSP's EHR so that data can be track and compared to Health Plan 3 referrals. DWIHN, Health Plan 3 and PCE planned to meet with the four CRSPs on August 8 to go over data that is pulled from this new radio button to see it matches Health Plan 3. DWIHN is working on creating a shared platform so data can be seen. This will not have any PHI.

Shared Platform and HEDIS Scorecard

Healthcare Effectiveness Data and Information Set (HEDIS) is a tool used by health plans to measure performance on important areas of care. DWIHN has developed a HEDIS scorecard based on claims from our CRSP and claims pulled from the MDHHS claims warehouse CC360. DWIHN is following the guidelines set from NCQA as to the behavioral health HEDIS measures to monitor and report on. These measures are a combination of medical interventions and behavioral health interventions that affect one's recovery and independence in the community.

Certain HEDIS scores have goals set by the state, for the ones that do not DWIHN purchased Quality Compass. Quality Compass is how the Health Plans set and evaluate their HEDIS measure goals. DWIHN set our HEDIS measure goals in line with the Health Plans.

The HEDIS Scorecard was first presented and provided trainings to CRSP's in October-November 2022. Trainings have been created and put on the DWIHN website and IHC meets with CRSP agencies to show them how to navigate the system and pull claims data that will assist in the treatment of members. Trainings and education occur monthly. The current HEDIS certified platform displays individual CRSP provider data to allow early intervention and opportunity to improve outcomes. HEDIS scores are cumulative and based on a year-end score.

The HEDIS certified platform will include measures for Opioid Health Home and Behavior Health Home by October 2023. DWIHN and Vital Data continue to work on the HEDIS platforms that show the data for these QIP for providers.

During the month of July, the HEDIS scorecard was reviewed at 11 CRSP monthly meetings and FUH data was shared. IHC created an educational presentation on HEDIS measures and definitions for CRSP's and medical directors, there is a place on the DWIHN website under Provider Resources for HEDIS.

HEDIS Measure FUH has consistently increased but at this time the estimated score is not going to meet the goal. IHC and the Quality Department are working on a new QIP for racial disparities that seems to be a large factor. IHC and Quality are meeting with the five largest CRSPs in August to discuss FUH scores and racial disparities. IHC is offering a lunch and learn in August. IHC will also send out memos to medical directors at the CRSP level. Dr. Faheem discussed HEDIS scores at the last medical directors meeting in July

HEDIS Measure AMM is currently not pulling data, this may be due to coding changes by MDDHS. DWIHN IT department and VDT are investigating.

DWIHN and VDT met on the mobile app and gave feedback for changes and it was decided not to roll out the trainings until phase two is complete this was to be in May but it was discovered there is a securities issue with documents coming from a PCE system to the mobile app. IHC is meeting with PCE to discuss other options. PCE has a member portal that all PCE clients have instituted in their EHR's. DWIHN is in discussions with VDT to see if the care gaps can be transferred in to MHWIN.

Below are the HEDIS scores as shown in the Scorecard as of May 2023 compared to the year-end 2023 score. This is all CRSP scores combined.

Yellow= Current Score

Green = Meeting goal

Orange = Almost meeting goal

Red = Not meeting goal

Measure	Measure Name	Eligible	Totally Compliant	Non-Compliant	HP Goal	23-May	Estimated Yr. End
ADD	Follow-Up Care for Children Prescribed ADHD Medication Continuation Phase	241	51	190	70.25	21.16	35.93
ADD	Follow-Up Care for Children Prescribed ADHD Medication Initiation Phase	335	166	169	58.95	49.55	57.87
AMM	Antidepressant Medication Management Acute Phase						
AMM	Antidepressant Medication Management Continuation						
APM	Metabolic Monitoring for Children and Adolescents on Antipsychotics						
APM	Blood Glucose and Cholesterol 1-11 age	536	42	494	23.36	7.84	26.46
APM	Blood Glucose and Cholesterol 12-17 age	1095	147	948	32.71	13.42	38.08
APP	Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics						

APP	Ages 1-11	170	114	56	67.39	67.06	71.49
APP	Ages 12-17	327	237	90	71.16	72.48	77.64
BCS	Breast Cancer Screening	12807	2428	10379	59.29	18.96	25.66
CBP	Controlling High Blood Pressure	13113	2145	10968	79.08	16.36	30.77
CCS	Cervical Cancer Screening	36246	11324	24922	63.99	31.24	38.7
COL	Colorectal Cancer Screening	0	0	0	0		
FUH	Follow-Up After Hospitalization for Mental Illness 30 day						
FUH	Ages 6-17	299	182	117	70	60.87	66.73
FUH	Ages 18-64	3101	1355	1746	58	43.7	49.91
FUM	Follow-Up After Emergency Department Visit for Mental Illness						
FUM	Ages 6-17	577	493	84	84.33	85.44	83.66
FUM	Ages 18-64	1201	562	639	61.05	46.79	48.66
SAA	Adherence to Antipsychotic Medications for Individuals with Schizophrenia	4017	2731	1286	85.09	67.99	82.69
SMD	Diabetes Monitoring for People with Diabetes and Schizophrenia	1301	291	1010	85.71	22.37	53.27
SPR	Use of Spirometry Testing in the Assessment	1317	205	1112	31.48	15.57	16.84
SSD	Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Med	6114	2683	3431	86.36	43.88	89.06

FINANCE

Detroit Wayne Integrated Health Network (DWIHN) issued \$1.3 million in stability payments on July 7, 2023 to eligible skill building and supported employment providers.

Secondly, the VP of Finance presented the FY2024 recommended Operating Budget at the joint Finance and Program Compliance Committee meeting on August 2, 2023. The FY2024 recommended Operating Budget amounts to approximately \$980.4 million, which is 5% (\$52.4 million) less than the FY2023 amended Operating Budget. The decrease is directly related to the anticipated reduction in Medicaid due to the end of the Public Health Emergency (PHE).

VICE PRESIDENT OF CLINICAL OPERATIONS

Juvenile Restorative Program:

As of July 24, 2023, there were six active members enrolled in the Juvenile Restorative Program (JRP), with another seven referred. The Children's Initiative Department met with provider this month to discuss the referral status, program assignments, and monthly financial status submissions. Provider to also coordinate with Care Management Organizations (CMOs) as well and submit bi-weekly summary reports. DWIHN is finalizing service utilization guidelines for the program.

MDHHS Grants:

Children's Initiative Department submitted the FY 24 grant renewals to MDHHS this month:

- System of Care Block Grant (SOC)
- Infant and Early Childhood Mental Health Consultation
- Infant and Early Childhood Mental Health Consultation Expansion
- Infant and Early Childhood Mental Health Consultation – Home Visiting
- Infant Toddler Court Program

MichiCANS:

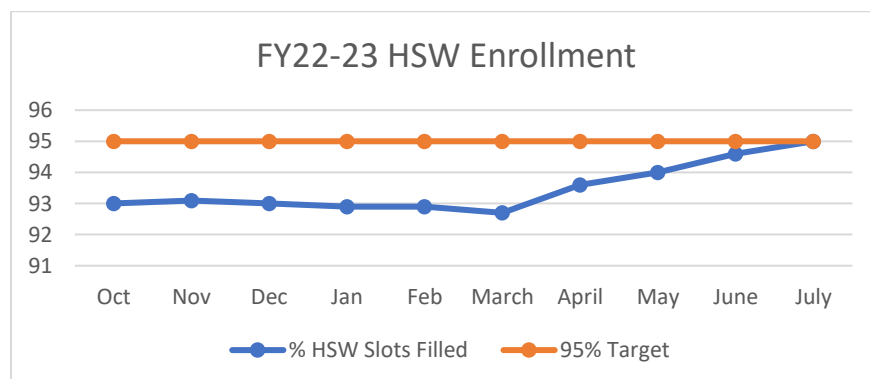
DWIHN and The Children's Center participated in multiple meetings this month to discuss the soft launch pilot to start October 2023. Reviewed the MichiCANS Screener and the Comprehensive assessment. This assessment is replacing the CAFAS.

Habilitative Support Waiver (HSW):

In an effort to reach 95% enrollment of available HSW slots, DWIHN implemented several strategies as a part of an internal corrective action plan. These strategies were initiated in March 2023 and include:

- DWIHN Residential Team identifies potential HSW enrollees, educates members on HSW benefits, and obtains the initial certification/consent form.
- DWIHN utilizes data from MHWIN to help CRSPs identify potentially eligible members. Every 60 days the UM department sends out a list of identified members to the CRSPs asking them to, if appropriate, explain HSW to those members and begin enrollment as a part of the IPOS process.
- Ongoing training with CRSPs to educate on HSW services to identify/enroll members into HSW.

As a result of these initiatives, enrollment has significantly increased. In the month of July 2023, 15 new enrollments were completed, which resulted in DWIHN meeting the 95% target enrollment rate.



General Fund Benefit (GF):

Of the General Fund Exception authorization requests reviewed during July 2023, there were 171 approvals. This is a 9% decrease from the month of June and is consistent with the intentional effort to better manage dependency on General Fund for outpatient behavioral health services. These efforts include more scrutiny

of health insurance status, earlier interventions with CRSPs regarding repeat GF requesters and earlier identification of those who present with no evidence of effort to pursue health insurance benefits. This has resulted in significantly increased communications with providers regarding MDHHS procedures and provider measures to assist the responsible party with the acquisition of health insurance benefits process.

New Initiatives:

1915iSPA - Services include Community Living Supports, Respite, Fiscal Intermediary, Housing Support, Supported Employment, Skill Building, Medical Equipment, Environmental Modification, and Enhanced Pharmacy Services. Individuals recommended for any of these services are first required to be assessed and referred for approval through DWIHN and then MDHHS. DWIHN has over 6,000 members that receive at least one of the above-mentioned services. DWIHN has approved and enrolled 3,126 (2,740 last month-15% increase). All members receiving 1915iSPA services must be enrolled with the State by 9/17/23.

Remedial actions implemented to ensure compliance include monthly meetings at the State level with PIHPs and CMHSP Leads to discuss progress and barriers, providing weekly reports to CRSPs and monitoring enrollment performance, presenting 1915iSPA at monthly provider meetings, individual meetings with Leadership at each CRSP with a high proportionate number of potential enrollees, and conducted two trainings for both the adult and children provider networks.

CCBHC:

A CCBHC site provides a coordinated, integrated, comprehensive services for all individuals diagnosed with a mental illness or substance use disorder. It focuses on increased access to care, 24/7/365 crisis response, and formal coordination with health care. DWIHN submitted the SAMHSA CCBHC Expansion grant application in May 2023. Awards will be announced in September 2023. The State of Michigan has also announced that they are expanding the CCBHC Demonstration, which will add 6 additional providers in our region starting 10/1/23. DWIHN continues to meet with MDHHS to advocate on becoming a CCBHC direct service provider. DWIHN is currently working on strengthening our PIHP/CMHSP firewalls to ensure compliance with state standards and expectations. Plans for providing outpatient services are currently being developed as well.

Provider Network:

DWIHN has announced a Crisis Continuum RFP, which is currently in process, with a target start date of October 1, 2023. Due to the ongoing capacity issues in the children's provider network, DWIHN is calling for a Request for Expansion of this network. In addition, DWIHN has also put out a Request for Information to determine if there were other providers within our current network that would like to expand to provide services within the School Success Initiative.

CHIEF MEDICAL OFFICER

Behavioral Health Updates, Education and Outreach:

- DWIHN has continued outreach efforts for behavioral health services: Last edition of Ask the Doc Newsletter in July emphasized the importance of reenrollment after the end of the Public Health Emergency (PHE) and the steps that our members and providers have to take to get their packets completed.
- The Chief Medical Officer met with the University of Michigan Child and Adolescent Service Chief for an introductory meeting and have scheduled quarterly meetings with them. Updated them on children's services in Wayne County, referral processes, waiver services, crisis services and provided flyers.
- We have focused on collaborating with teaching programs such as Wayne State University, not only to increase awareness about community mental health but also to create pipeline programs for various disciplines.

- The Chief Medical Officer is scheduled for lectures on community mental health (CMH) and CMH services for Psychiatry Residents as well as Child and Adolescent Psychiatry Fellows over the next 6 months.
- We met with Wayne State Chairman of Psychiatry as well as Adult and Child/Adolescent Psychiatry Program Directors to discuss clinical rotations for residents and fellows at our Crisis center. Both programs are interested in these rotations so that the psychiatrist in-training have experience in Emergency Psychiatry. Sample GME contract was shared by WSU. We will implement teaching contracts once the Crisis center location is ready and available and at that point it will require the programs to notify and seek approval from ACGME, Accreditation Council for Graduate Medical Education.
- Dr. Faheem met with Physician Assistant School at WSU in July 2023. The Program Director was very interested in rotations of PA students at the Crisis Center. They shared general expectations from the rotations. We will work on rotation schedules and finalization of teaching contract once Crisis center opening date is confirmed.

State Hospital Update:

DWIHN visited Walter Reuther Psychiatric hospital on 7/18/23 after the children hospitalized at Hawthorn moved to WRPH. Hawthorn Center is not a hospital anymore and the staff at HC have been merged with WRPH. Information was provided by Dr. Mellos and the hospital leadership on the processes incorporated to separate the adult and children's wings, both physically and operationally. Several critical spots have been marked where security has been placed and the children's or adult clinical teams and individuals could not pass without an announcement and clearance. Very stringent scheduling has been put in place for common areas like the library, outdoor space and other areas that could be used by both age groups and the areas cannot be used until reserved. They talked about the adult population going through some accommodations as some of their activities have been restricted and limited. The admissions for children to WRPH is currently on hold with expected return in a month.

In July, two (2) DWIHN youth moved to WRPH for continued treatment. In anticipation of this event, the MDHHS State Hospitals Administration coordinated with Pine Rest Christian Mental Health Services to open a second location for the Intensive Community Transition Program (ICTP) stepdown; the first is housed at Hope Network. Three (3) youth monitored by DWIHN were transferred to this program in June 2023. The State Hospitals Administration assumes monitoring of these cases after transfer.

CRSP Medical Director Meeting:

The Chief Medical Director met with the Medical Directors of CRSP on July 13. The Medical Directors had requested information on Crisis Services and our VP of Crisis, Grace Wolf, was invited to the meeting to discuss new evidence in the crisis area as well as DWIHN's progress on the Crisis Continuum. The information was very well received. CRSP Medical Directors had questions around funding on use of Medication Assisted treatment for individuals with dual diagnoses who are served by primary mental health CRSP. The Substance Use Director is scheduled to provide more information to them at the next meeting in October 2023. DWIHN's HEDIS Measures and State Performance Indicators were discussed with Medical Directors and information on how to review their own data was discussed. Medical Directors were encouraged to be more involved in these measures and work with their organizations on improvement plans.

State Medical Director Meeting:

The PIHP/CMHSP Medical Director Meeting with Dr. Pinals in July covered topics around the new assessment tool Michigan CANS that will be launched to replace CAFAS and PECFAS. Medical Directors had feedback on the limitations of these tools. Telemedicine Policy was discussed again. Medical Directors continued to express their concerns around the language in the last State bulletin that emphasizes periodic in-person appointments in between telemedicine appointments. They were concerned about the out-of-State providers who provide medication management given the shortages in psychiatry. Dr. Pinals will escalate it to the relevant group. There was also a discussion around State guidelines that often lag Federal guidelines

especially around substance use. Recently, the relaxations around federal standards for methadone take-home doses did not translate to the State which has created confusion for SUD prescribers. Dr. Pinals indicated that she will address it with the SUD team and will discuss quicker updates on State policies.

IPLT Updates:

Improving in Practice Leadership Team Committee continues to review new evidence, clinical policies, procedures and practice guidelines in an effort to improve clinical services across network and has provider representation in addition to internal specialty representation. This month, IPLT reviewed and discussed the CRSP discharge procedures. The new form created by the Children’s Department was reviewed to capture CRSP discharge information pertaining to the reasons for case closures. The new DSM-5 TR changes that were recently released, and a summary was provided on the important changes particularly the new diagnoses that were added. Information on the DSM-5 TR changes is being shared with providers so they can share it with the network. IPLT also reviewed the Autism Access policy. Very robust discussion happened on ways to decrease barriers for members yet assuring an accurate diagnosis is made. The Autism lead will work on incorporating feedback from the group around having options to refer youth for diagnostic evaluations if referred by pediatricians, schools and/or other PIHP without having to go through screening at Access center. IPLT also reviewed and voted on replacing an old Clinical practice guideline on eating disorder with a new version released by American Psychiatric Association this year.

QISC Updates:

The QISC Meeting occurred on July 18, 2023 and focused on two areas. The first one was review of Behavior Treatment Plan data and analysis. Feedback from the group included closer review of sample cases on BTPs to identify if IPOS interventions were followed.

QISC also reviewed the action steps based on the Echo survey that has been shared by Customer Services regarding member satisfaction. Any item where the score was less than 60% were assigned to leads in those areas and interventions to improve member satisfaction were discussed. The four areas of focus based on the survey were: Improve overall treatment, improve member and or family perceived progress with treatment, decrease office wait times, Improve member informed of treatment options after benefits are depleted. A target to improve these scores by a minimum of 10% was discussed. Draft interventions were proposed by Customer Service, Adult and children department around policy updates, training for network, happy or not kiosks as well as improvement arounds member’s understanding of improvement during IPOS meetings. CRSP Quality directors as well as persons-served, who are members of QISC, provided valuable feedback. Revisions will be done and presented again to QISC in September/October.

New Initiatives being reviewed:

DWIHN has completed a grant application for Zero Suicide. We are expected to hear about the outcome in September. Once we hear about the outcome of the grant, our goal is to launch Zero Suicide Evidence based practices at our direct CMHSP functions such as the Crisis Services that will be launching soon as well as standardize things across the network as well.

HUMAN RESOURCES

During the month of July, the Department of Human Resources hired the following employees:

Systems Administrator	Information Technology
Call Center Representative	Call Center
Administrative Assistant	Integrated Health/OBRA
Lead Audio Visual Technician	Grants and Community Engagement
Call Center Clinical Specialist (Part-Time)	Call Center
Unit Administrator	Crisis Services
Jail Navigator	Grants and Community Engagement
Student Intern	Grants and Community Engagement

DWIHN HR continued its Supervisory Institute for management staff, provided detailed information to the DWIHN Board regarding the Compensation Study, and started contract negotiations with the GAA and AFSCME unions.

COMMUNICATIONS

Student Athlete/Influencers Update:

Social Media Influencer	# of Posts	Engagement/Impressions
SPS Edge/Lindsay Huddleston	30 Posts (Instagram)	2,530 total views (YouTube)
The Capital Brand/Randi Rosario	5 Story Posts, 2 Posts	Over 12.3K total views
Detroit Youth Choir	4 Story Posts, 3 Post	3,060 total Views

SPS Edge attended DPSCD Media Day to talk with numerous schools about the importance of mental health with Student-Athletes.

All three influencers assisted in promoting the DWIHN "Youth Mental Health Ambassador" Scholarship as July focused primarily on promoting the scholarship in Instagram story posts, and YouTube video interviews (Student Athlete).

The Detroit Youth Choir and Youth United collaborated on a lot of posts highlighting the importance of mental health in youth, resources and Youth United events during the month of July.

Social Media Performance Report Summary for July

- Impressions: 700,250 **up 28.2%**
- Engagements: 7,695 **up 52.8%**
- Post Click Links: 2,725 **up 36.9%**
- Engagement Rate: 1.1% **up 20%**
- **Total Audience Growth over the last month was 14,805 up 2.1%.**
 - *Facebook audience grew the most in July by 196.9%*

Website Analytics

- Website sessions increased by **44.14%** totaling 52,166 sessions for the month of July.
- Facebook was the top social media platform driving the most users to the website.
- The top pages (excluding the Home page 11,256 views) were "**Substance Use Disorders**" with **11,909 views.**
 - *"For Providers" with 5,025 views*
 - *"Find a Provider" with 859 views*

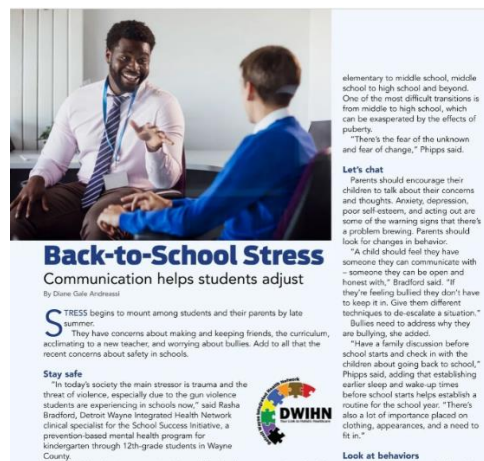
Google Analytics

- 1,145 Business Profile interactions
- 2,909 People viewed the DWIHN Business Profile
 - 2,513 (86% Google search - desktop)
 - 260 (9% Google search - mobile)
 - 101 (3% Google Maps - mobile)
 - 35 (1% Google Maps - desktop)
- 1,696 Searches DWIHN was shown in users search results.
 - DWIHN - 808
 - Detroit Wayne Integrated Health Network - 562
 - DWHIN - 96
 - DWIHN training - 72

WDIV	“Who is DWIHN?”	Campaign runs 5 months
Scripps Media, Channel 7, TV 20, Bounce	Kids in Crisis Smoking	Campaign runs all year includes social media posts and streaming
Fox 2 Detroit	Addiction	Campaign runs 5 months includes social media posts
Cumulus Radio	Kids in Crisis	5-month campaign
MI Chronicle	Monthly stories	Year-long
Latino Press	“	“
Arab American News	“	“
Hamtramck Review	“	“
Yemeni News	“	“
Ask the Messengers	SUD messaging	“
Metro Parent	Addiction Kids & Suicide	May/June
Comcast/Effect TV	Addiction	August/September
Mind Matters Dr. Michele Leno	Access Helpline	Year-long
Global Recovery Live	SUD	Year-long
Global Media TV (Middle Eastern TV)	SUD	June-September
Community Publishing	Comms/SUD messaging	12 months-downriver communities

Media:

DWIHN CEO/President Eric Doeh is featured on the cover of The Arab American Today magazine with a story inside about DWIHN’s services and supports. Inside Canton Today featured a DWIHN story about Back to School stress.



Community Outreach - DWIHN/Youth United/Youth Move Detroit:

In July, DWIHN hosted its annual meeting and community celebration at Greater Grace Temple in Detroit where almost 300 people were in attendance. DWIHN also participated in numerous outreach events including Wayne State’s Health Fair and College Block Party.

Youth United hosted several events including a BBQ Bash to End Stigma at Riverside Park in Detroit, as well as a Courageous Conversation: Defining your Sports Mentality, to support the mental wellness of student athletes held at the Pistons Practice Facility. (Flyers have been shared with L. Blackshire)

DIVERSITY, EQUITY AND INCLUSION OFFICER

The DEI Officer participated in the following trainings and meetings on behalf of DWIHN:

- Reducing Unconscious Bias, (RUBI) Training - Mindful Listening and Communication: Mindful listening is about being present in your conversation so others feel heard and perceive your intention to listen and understand them. It can create a safe space for the speaker to share their thoughts and feelings with an open, attentive listener. Similar to conscious listening, you put effort into paying attention to what the other person shares while honoring both of your needs. In some situations, being aware of your own needs in a conversation may make it more difficult to remain judgment free, which is the goal of mindful listening.
- DEI Foundations Training Program launch (McLean & Co) - Kick off date set and participants have been selected; Save the Date announcements are being sent in August 2023
- Michigan League for Public Policy's "21-Day Racial Equity Challenge" (21 days of action toward the goal – sharing, posting and making others aware of the racial equities in different areas of our country). The disparities in health, wealth and well-being that we seek to eradicate are largely a result of racism enshrined in public policy over the course of U.S. history. Today, we cannot hope to achieve our mission of economic security for all Michiganders without understanding the origins of the concept of race, how it influences us as individuals and as an organization, and how it functions to preserve inequity in our laws, institutions and systems.

INFORMATION TECHNOLOGY

Business Processes:

- **CRSP Risk Matrix Revisions**
Finalized the PHQ-A Intake logic and reviewed with business in test environment, pushing to production.
- **Autism Risk Matrix**
High level data regarding members, ABA Providers, & Diagnostic Evaluators have been reviewed with business along with formatting/color scheme- all aspects finalized.
- **MHWIN Staff Module Changes**
Race and Hispanic or Latino Ethnicity categories have been added to the staff module for compliance with NCQA.
- **School Success Initiatives**
New module created under School Based Services in MHWIN titled 'Other Referrals' for the purpose of capturing referrals for health centers, etc.
- **Mobile Crisis Services**
Module within MHWIN is complete.

Applications and Data Management:

- **Henry Ford Joint Project**
Linking the dashboard to the HFH Pilot Project status site.
- **Dashboards for Behavioral Health Homes and Opioid Health Homes**
Currently in the process of creating new PowerBI dashboards for monitoring health home information.

- **Children's Services Dashboard**
Delivered the first nine dashboards for Children's services. Continuing to work on additional dashboards.
- **Provider Network Adequacy Dashboard**
Adding measures for HSAG reporting
- **Warehouse Data Reconfiguration**
Continue testing the restructured tables for performance issues
- **VDT**
Converting data feeds to version 2.06
- **EQI reporting**
Completed EQI period 1 for MDHHS

Infrastructure/Security/IT Compliance:

- **Building Construction**
 - Woodward / Milwaukee Network hardware ordered. Awaiting estimates from suppliers on delivery dates.
 - Phone System approved. Navigating transition services between outgoing to incoming vendor.
 - Crisis Center IT Hardware to be purchased to provide Proof of Concept (POC) for hands on use and evaluation.
 - Continuing to work to configure the building security and video camera systems to meet the needs of the new Crisis Center as well as support a Multi-Campus system going forward.
 - Nutanix migration of virtual machines completed. Physical servers on-hold pending file server migration.
 - Purchasing process underway for badging system camera, printer, and backdrop and other needed items to support the building access system and other security systems.
- **Security**
 - vCISO project is continuing to identify gaps in various policy and SOP to meet compliance standards.
 - Multifactor Authentication (Currently >50% of the organization enrolled).
 - Roll Based Security Phase 1 analysis nearing completion
- **Onboarding/Offboarding**
Ongoing and continuous development process with HR to finalize a new automated onboarding/offboarding process in Therefore to meet Access Control standards in compliance frameworks.