



Quality Operations Technical Assistance Workgroup Meeting Agenda
Wednesday, February 28, 2024
Via Zoom Link Platform
9:30 a.m. – 11:30 a.m.

- | | | |
|------|--|---------------------|
| I. | Announcements | A. Siebert |
| II. | Substance Use Disorder (SUD) | J. Davis/G. Lindsey |
| III. | Recipient Rights | C. Witcher |
| IV. | DWIHN Policies | |
| | ✚ Assisted Outpatient Treatment (AOT) | A. Gabridge |
| | ✚ Residential Services Referral Procedure | K. Mancani |
| V. | QAPIP Effectiveness | |
| | <i>Quality Improvement</i> | |
| | a. MDHHS Waiver & iSPA Review Preparations | S. Denny |
| | b. Verbal Consents | S. Denny |
| | c. In-Service/ IPOS Training | S. Denny |
| | d. Critical/Sentinel Events Updates: | C. Spight-Mackey |
| | • FY2023-2024 Data | |
| | • Training Schedule | |
| VI. | Adjournment | |



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Via Zoom Link Platform
9:30 a.m. – 11:30 a.m.
Note Taker: DeJa Jackson

1) Item: Announcements:

- DWIHN has successfully submitted 2024 NCQA survey assessment for the three-year accreditation.
- DWIHN Crisis Care Center will be soon cutting the ribbon and opening. It is expected to open sometime in March.

2) Item: Substance Use Disorder (SUD) – Judy Davis

Goal: Updates from SUD

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

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

Discussion		
<p>Judy Davis, Director of SUD services shared the following with the workgroup:</p> <ul style="list-style-type: none"> • On January 13, 2024, DWIHN’s SUD unit submitted the request for application with MDHHS to be a part of the recovery incentive pilot program. A program where members can earn incentives up to \$500 a year for meeting certain milestones while they’re in recovery. SUD is expected to hear a response from MDHHS sometime in March. For providers that have not submitted the required documentation and are still interested in being a part of the pilot, there is still an opportunity to submit your information to be a part of the pilot. • SUD submitted to the provider network Smartsheet new links for that providers can use effective immediately. The smart sheet links are for services that include your NARCAN saves, your pre authorizations for women specialty conferences and any other services that is billable through the FSI process. Also, the Smartsheet includes the harm reduction resource tools, that includes sleeping codes, terra bags requests and brochure requests. There is also a Smartsheet link for Recipient rights complaints. It is imperative that providers use the links to report on services as noted, SUD will no longer accept the information via email. • On February 27th providers should have received an email regarding the new counseling requirements that have been implemented by LAURA. This includes new information regarding a limited certified counselor, services will be available at the next treatment provider meeting being held in March. 		



<ul style="list-style-type: none"> • A webinar will be held on 42CFR on Thursday, February 28th, information provided in the CHAT. • A public hearing for SUD's 1115 waiver, which is in our Medicaid services, bills public hearings will be held on February 28th from 1pm-3pm. Other public hearings will be held on March 1st at the same time. 		
Provider Feedback	Assigned To	Deadline
No additional provider feedback was provided.		
Action Items	Assigned To	Deadline
None Required.		



3) Item: Recipient Rights – Chad Witcher

Goal: Updates from ORR

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

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

Discussion		
Chad Witcher, Prevention Manager ORR, informed the workgroup of the following updates: The last week in January and the first week in February, the department (MDHHS) was on-site assessing the sufficiency, the compliance of the recipient rights protection system with State law and State regulation and the contract with the department, ORR was found to be in substantial compliance.		
Provider Feedback	Assigned To	Deadline
No Provider Feedback.		
Action Items	Assigned To	Deadline
None Required.		



4) Item: DWIHN Policies

Goal: Assisted Outpatient Treatment (AOT)

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

NCQA Standard(s)/Element #: QI CC# ___ UM # ___ CR # ___ RR # ___

Discussion		
<p>Allison Gabridge shared with the group the following AOT policy/procedure:</p> <p>Assisted outpatient treatment (AOT) is civil commitment court-ordered treatment for individuals with a serious mental illness who meet strict legal criteria per the Michigan Mental Health Code. The purpose of this procedure is to provide guidelines for Clinical Management of Assisted Outpatient Treatment (AOT) Orders for all DWIHN Staff and Network Providers. This procedure provides standards for the coordination of care and documentation for any individual on an Assisted Outpatient Treatment (AOT) order or deferral. Candidates for AOT usually have been non-adherent with prescribed medication and have multiple inpatient psychiatric hospitalizations. Adult initiatives have really been focusing attention to AOT members and the providers who are serving them. The expected outcome for the new policy procedure is to improve knowledge of AOT procedures, increase adherence and members quality of care, and to make sure that DWIHN is in court compliance regarding time frames, documentation, necessary outreach, and clinical guidelines.</p>		
Provider Feedback	Assigned To	Deadline
No Provider Feedback.		
Action Items	Assigned To	Deadline
None Required,		



4) Item: DWIHN Policies

Goal: Residential Services Referral Procedure

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

NCQA Standard(s)/Element #: QI CC# ___ UM # ___ CR # ___ RR # ___

Discussion		
<p>Kathryn Mancani, Interim Director of Residential Services provided the following updates for the “Residential Services Referral Procedure”: The Purpose of the procedure is to provide the guidelines to delineate the referral and brokering/placement processes for specialized residential services for Detroit Wayne Integrated Health Network (DWIHN). The expected outcome is that Wayne County residents who are Medicaid eligible and in need of Community Living Supports and/ or Personal Care Services who have a disability designation as seriously mentally ill (SMI) or Intellectually/ Developmentally Disabled (I/DD) are assessed for the level of care to best meet their needs, and subsequently placed in the appropriate setting in a timely fashion.</p> <ul style="list-style-type: none"> ○ If there is an adult over the age of 18 who needs residential placement into one of our contracted service locations within Wayne County, that is the task of our unit in Residential Services. ○ There is a clinical packet that would be sent to DWIHN’s Residential Unit. Packets are received from the CRSP level, the hospital settings, both inpatient hospital settings or the community hospitals, jails, nursing homes, etc. ○ Once the packet is received, within 24 hours the Residential Unit will reach out to the referral agent, confirming receipt of the packet and then assign it to the residential care specialist/RCS. ○ The RCS will schedule a meeting with the member/guardian, the CRSP if they’re involved, the nursing home, or location listed and complete a residential assessment. The residential assessment is looking at the community living support (cls) needs or personal care needs that the member may need in the service location. ○ Once the assessment is complete, the case is submitted to the Residential Care Coordinators or our Brokers. The Broker is tasked with brokering the case into the community, so getting the member out of the hospital setting into one of our contracted service locations. ○ Once the member is contracted to a service location, Residential will authorize personal care or community living supports or both. 		
Provider Feedback	Assigned To	Deadline
No Provider Feedback.		



Action Items	Assigned To	Deadline
None required.		



5) Item: QAPIP Effectiveness – Quality Improvement

Goal: MDHHS Waiver & iSPA Review Preparations

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

NCQA Standard(s)/Element #: QI CC# ___ UM # ___ CR # ___ RR # ___

Discussion		
<p>Sara Denney, Clinical Specialist Quality Improvement shared the following with the workgroup for the status of the MDHHS review preparations:</p> <ul style="list-style-type: none"> • Status of MDHHS Review Preparations <ul style="list-style-type: none"> ○ Case Record Reviews: <ul style="list-style-type: none"> 10 SEDW 10 CWP 22 of 25 HSW 64 of 73 iSPA ○ Trends Noted: <ul style="list-style-type: none"> Use of verbal consent not in line with statutory requirement of consent. <p>Verbal Consents</p> <ul style="list-style-type: none"> • September 28, 2021, MDHHS Memorandum rescinded verbal consent since the end of the health emergency. You can use verbal consent, but it requires a third-party witness. <p>Staff files</p> <p>Due to MDHHS this Friday, March 1, 2024</p> <ul style="list-style-type: none"> ○ 188 Professional Staff files ○ 415 Aide staff files <p>Trends Noted:</p> <p>Professional Staff files:</p> <ul style="list-style-type: none"> ○ No issues/concerns. <p>Aide Staff files:</p> <ul style="list-style-type: none"> ○ Documentation of IPOS Training – multiple dates on one form, no evidence of SC/CM training, no IPOS training evidence. ○ Incorrect name spellings/ DOB on ICHATs. ○ Prior to hire ICHATs after DOH 		



<p>In-Service/ IPOS Training Training Direct Support Professionals on the IPOS</p> <ul style="list-style-type: none"> • Each IPOS Training event requires a separate log. • Trainings can be face to face with DSPs <ul style="list-style-type: none"> ○ Obtain signatures from staff receiving training log; trainee also signs/e-signs. • Training can be virtual (Check the virtual training box on the training log) <ul style="list-style-type: none"> ○ The trainee enters the names of DSP present for the training and signs/e-signs the training log. (Signature of DSP trainees not required.) • Training logs should be uploaded under the training log tab for the IPOS in MH-WIN <p>Progress Notes – CLS and Vocational services 110 batches of Progress Notes 55% reviewed 45% remaining</p>		
Provider Feedback	Assigned To	Deadline
No Provider Feedback.		
Action Items	Assigned To	Deadline
None Required.		



5) Item: QAPIP Effectiveness – Quality Improvement

Goal: Critical/Sentinel Events Updates

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

NCQA Standard(s)/Element #: QI CC# ___ UM # ___ CR # ___ RR # ___

Discussion		
<p>Carla Spight-Mackey, Clinical Specialist Performance Improvement, shared with the group Critical/Sentinel Events updates: FY2023-2024 Data updates (10/1/2023-2/27/2024)</p> <ul style="list-style-type: none"> • CE/SE current data review status: <ul style="list-style-type: none"> ○ 9 Being Reviewed ○ 281 Need Information ○ 9 SEC/PRC Review ○ 59 Root Cause Analysis Required ○ 22 Did not meet Criteria ○ 150 Cases Closed ○ 531 Total Events ○ Total Members being served: 123,000 <p>It was emphasized that any requests must be submitted within 24 hours. MDHHS has rolled out the CRM reporting system, which looks at our CE/SE information in “real time”. Please reach out to the CE/SE team at DWIHN if you have any questions and or need additional information for submitting requests.</p> <p>Training Schedule:</p> <ul style="list-style-type: none"> ○ March 14 ○ April 11 ○ May 9 ○ June 13 <p>Registration is required for all training through DWIHN’s webpage.</p>		
Provider Feedback	Assigned To	Deadline
No Provider Feedback.		
Action Items	Assigned To	Deadline
None Required.		

New Business Next Meeting: 03/27/24

Adjournment: 2/28/2024



Quality Operations
Technical Assistance Workgroup
MDHHS Review Preparation Updates
2/28/2024

Status of MDHHS Review Preparations

Case Record Reviews

10 SEDW

10 CWP

22 of 25 HSW

64 of 73 iSPA

Trends Noted

Use of verbal consent not in line with statutory requirement of consent

Status of MDHHS Review Preparations

September 28, 2021

MDHHS Memorandum rescinded the memo titled “Accept Verbal Consent for Services”

Verbal consent may only be given by the person receiving services and it must be witnessed and documented by an individual other than the individual providing treatment.

Providers may still make use of alternatives to face-to-face encounters to obtain written consent, including but not limited to, digital signature, fax, email or picture of signed document sent via text or email.

Status of MDHHS Review Preparations

Staff Files

Due to MDHHS this Friday, March 1, 2024

- 188 Professional Staff files
- 415 Aide staff files

Professional Staff Files

Approx. 50% are ready to go to MDHHS

Approx. 50% require additional evidence and or second review

Status of MDHHS Review Preparations

Staff Files

Due to MDHHS this Friday, March 1, 2024

- 188 Professional Staff files
- 415 Aide staff files

Aide Staff Files

Approx. 55% are ready to go to MDHHS

Approx. 45% require additional evidence and or second review

Status of MDHHS Review Preparations

Trends Noted

Professional staff files

- No issues or concerns noted

Aide Staff files

- Documentation of IPOS Training - multiple dates on one form, no evidence of SC/CM training, no IPOS training evidence
- Incorrect name spellings / DOB on ICHATs
- Prior to hire ICHATs after DOH

Status of MDHHS Review Preparations

Training Direct Support Professionals on the IPOS

- This requirement is a shared responsibility between the CM/SCs and the DSPs
- DSP staff require training on all new IPOSs
- If IPOS addendums include changes in the supports and services DSP provide, they require training on the amended plan.
- Utilize the standardized “DWIHN Treatment Plan Training Log” to document training staff on the IPOS.

Status of MDHHS Review Preparations

Training Direct Support Professionals on the IPOS

Each IPOS training event requires a separate log.

- If you train 2 staff at 10 am on 8/01/2022 and 1 staff at 1 pm on 8/01/2022, the trainings need to be documented on separate logs.
- If you train 1 staff on 8/01/2022 and 2 staff on 8/02/2022, the trainings need to be documented on separate logs.
- If you train 1 staff person on 8/01/2022 on two beneficiaries' plans, each beneficiaries' proof of training needs to be documented on a separate log.
- If you train 12 staff on one beneficiary's IPOS at 12 pm on 8/12/2022, the training can be documented on one training log.

Status of MDHHS Review Preparations

Training Direct Support Professionals on the IPOS

Trainings can be face to face with DSPs

- Obtain signatures from staff receiving training on the training log; trainee also signs / e-signs

Trainings can be virtual (check the virtual training box)

- The trainee enters the names of DSP present for the training and signs / e-signs the training log (signatures of DSP trainees not required)

Training logs should be uploaded under the training log tab for the IPOS in MH-WIN

Status of MDHHS Review Preparations

Training Direct Support Professionals on the IPOS

To locate the form on the DWIHN website

Go to Providers > Residential > CRSP, OP, & Res Provider Forms & Documents

Scroll toward bottom of page and select “Training Log Final”

Underneath you will find a PowerPoint outlining instructions for use, select “IV. Training Log PowerPoint 2.4.2021”

Link to the form on DWIHN website:

<https://www.dwihn.org/resources/upload/3420/Training%20Log%20Final.pdf>

Link to procedure on the DWIHN website:

<https://www.dwihn.org/resources/upload/3419/IV-traininglogPP2.4.2021.pdf>



Status of MDHHS Review Preparations

Progress Notes - CLS and Vocational services

110 batches of Progress Notes

55% reviewed

45% remaining

Trends Noted with Progress Notes

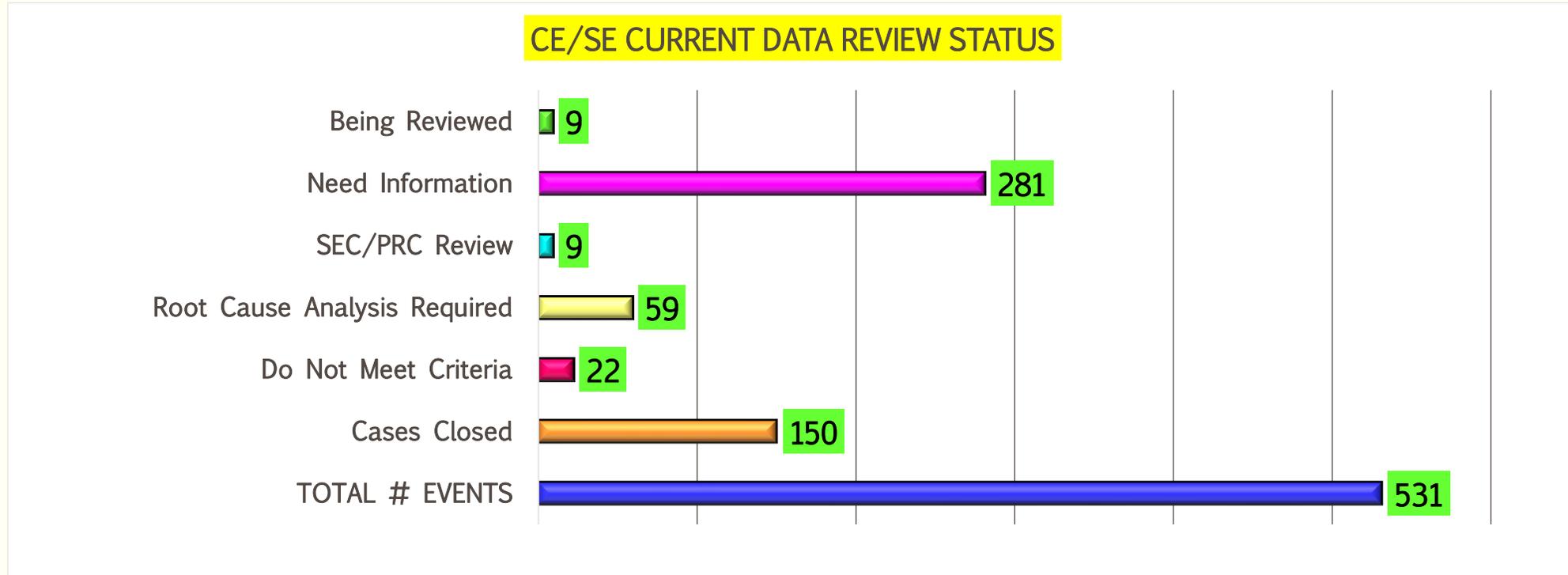
- Utilization of services does not match what is in the IPOS
- Goals identified on the progress note and the IPOS are not uniform

Quality Performance Improvement Updates



Quality Operations Technical Assistance Workgroup Meeting
Wednesday, February 28, 2024

FY 2023-2024 DATA UPDATES (10/1/2023 through 2/27/2024)



TOTAL MEMBERS SERVED: 123,000

Need information includes 83 deaths which require Death Certificates and/or ME Reports in order to officially close the record.

Critical/Sentinel Event Trainings/Registration

Next Trainings:

March 14

April 11

May 9

June 13

Registration is required.

Managers/Supervisors must register staff by clicking on the link below

Please Complete ALL of the information requested

Email address **MUST BE** the organization email NOT personal emails.

Space is Limited to the 1st - 75 participants. Wait lists will be established.

<https://app.smartsheet.com/b/form/33026fe9b0c7463fadd398bbc8f1c4d4>

QUALITY PERFORMANCE IMPROVEMENT TEAM CONTACTS

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