



Clinical Care Committee
Minutes
 12-4-09; 9:00-12:00 pm; Rm. # 107
 Meeting Room Telephone # 734-544-6810

G. Harris, S. Wiland, S. Keener, P. Moise, D. Healy, S. Reitmeier, J. Sahutoglu, M. Phillips, S. Weary, B. Spalding, J. Terwilliger, L. Newberg, J. Capobianco, M. Scalera, K. Milner, C. Witherow, M. Graban, C. Kudyba, (bolded name indicates present at meeting; non-bolded name indicates absent at meeting)

AGENDA ITEM	DISCUSSION POINTS	ACTION/OUTCOME	RESPONSIBILITY
I. Approve Agenda & Minutes	<p>Agenda changes</p> <p>Minutes Changes</p> <ul style="list-style-type: none"> • None <p>Updates: Mary Phillips – DD Admin group ROSC</p>	<p>Agenda approved</p> <p>Minutes approved</p>	
II. Breakthroughs	<ul style="list-style-type: none"> • None 		
III. Proposed DD Tool	<ul style="list-style-type: none"> • Mary advised that the Department has requested that some DD consumers within PIHP who are on HSW's be identified for use with a new tool, the Inter-RAI ID. • The tool hasn't been viewed by CCC yet. • The tool is strictly for data collection. • The Practice Improvement Team wrote a letter (addressed to Mike Head, Director of the Mental Health department) stating that the tool would not be appropriate for DD consumers. • DD Admin workgroup would like to forward the letter (or draft a similar one) to the Department on behalf of the PHP. • Sandy will take letter to AEC for approval on 12/14. • Larry advised that any new tool is supposed to go through regular channels, including the Outcomes and Evaluation Committee. 	<ul style="list-style-type: none"> • CCC approves the effort to express concerns to the department about use of the Inter-RAI ID tool. • Sandy will take the letter/concern/issue to the 12/14 AEC meeting. 	
IV. ROSC Update	<ul style="list-style-type: none"> • Marci updated group about the Recovery Oriented System of Care • There is a transformational change happening in how treatment is delivered. The recovery community is an integral part of treatment. There is 		

	<p>movement away from traditional treatment.</p> <ul style="list-style-type: none"> • 12/9 is the date of the symposium that will address ROSC and how the impact will be on the community and clinicians. • ROSC is not just for substance abuse, but also for mental health. • Phil asked if Marci would be willing to come to the RCAC in the spring to provide an update. Marci is willing. • Phil asked if there should be Peers Supports for the substance abuse community. Marci agreed that's something to work toward. 		
V. 2010 MDCH Full Review Indicators	<p>New/additional MDCH protocols for 2010 – CJ Witherow</p> <ul style="list-style-type: none"> • A full review will take place from April 12-23. • There is a plan to meet with DCH site reviewers to walk through some things about which CJ has concerns. • CJ will solicit feedback from CCC before meeting with DCH. • Mary volunteered to accompany CJ to the preliminary meeting with DCH. 		
VI. PISC input solicited	<p>Practice Improvement Steering Committee priority list (see attachments)</p> <ul style="list-style-type: none"> • Jeff presented a priority list from the PISC. • The priority list is for CCC to indicate what it believes should be PISC's priorities. • Jeff would like CCC to discuss and determine what the affiliation needs from the state. • Geralyn noted some concerns: resource and cost issues every time they start a new EBP, fidelity issues, what are the outcomes specific to each practice, • Steve requested that an identified measure for each of the practices be established. <p>CCC priorities that will Jeff will take back to PISC:</p> <ul style="list-style-type: none"> ○ Outcome data's effect on practices ○ Fidelity monitoring and sustainability ○ Staff resources ○ Consumer input ○ Quality improvement <ul style="list-style-type: none"> • Phil recommended that staff resources should #1 on the priority list. CCC agreed. • Phil: More consumer input/involvement with PISC. • Larry noted that if it's an evidence based practice, 		

	<p>that means there's been evidence that it's effective, that must mean there's been some kind of tool or measure to demonstrate that it does work. So there shouldn't be any mystery about how to demonstrate to the department that practices are effective.</p> <ul style="list-style-type: none"> • Steve noted that some of the studies were on different populations and in some of the studies, more than 1 outcome tool is used, and may not be in the public domain. • Larry requested that it's communicated to the Department that before they require an EBP they make sure it's applicable. • Sandy suggested that a good idea would be to come up with a tool that measures recovery. • Steve Adult SMI has been charged with addressing recovery measure. 		
<p>VII. Waitlist issue</p>	<ul style="list-style-type: none"> • Update on progress the 3 admin groups are making on the waitlist issue • Mary (DD Admin): Has feedback from 3 counties. <ul style="list-style-type: none"> ○ Lenawee: hasn't had any DD intakes since implementing the waiting list. They've identified all GF and spend-down consumers and are prepared to make changes as necessary. ○ Monroe: they haven't needed to implement a waiting list yet. ○ Livingston: han't had to implement a waitlist yet either. • Steve reported that for the Adult SMI workgroup, the waitlist issue has been the focus of the last 2 meetings. They're coming up with a tiered arrangement that everyone can agree on, and then each county will choose when to implement, based on need. • Larry wanted to make sure all 3 workgroups are following the TSG guidelines regarding waitlists. • Admin groups are not sure what the next steps are. Steve will contact Mary O'Hare and Jane Terwilliger regarding next steps. 	<p>CJ advised that she'd download the guidelines from the TSG website and forward to the committee.</p>	
<p>VIII. EBP</p>	<ul style="list-style-type: none"> • Jeff and Jessica have met and picked practices that the committee will focus on that meet 2 of 3 criteria: required by state, great number of people who will benefit, or if there will be great fallout if it's not followed. • The committee reviewed the current list of EBP's. • Jeff will update the list and send out to committee. • Jeff presented a document from DCH regarding Supported Employment. AEC will need to decide if 		

	the Affiliation should send a representative or not. Steve will remind Jane to take the document to AEC.		
IX. Workgroup updates	<ul style="list-style-type: none"> • None 	•	
X. Standing Agenda Items	<p>Performance Improvement (PI) Committee Update – Steve Wiland</p> <ul style="list-style-type: none"> • PI did an evaluation of how the committee did over the last year. • The dashboard will be pared down to more meaningful data. • Phil noted that the AEC also asked PI to come up with a measure of staff productivity. In addition, more consumer involvement was touched upon. • Mary O’Hare is still active in the committee as of now. 		
XI. Next Meeting	<ul style="list-style-type: none"> • January 8th, 2010, 9-12 	<p>Agenda items</p> <ul style="list-style-type: none"> • Evidence Based Practice (standing agenda item) 	<p>Parking lot</p> <ul style="list-style-type: none"> • CSTS supervisor communication concept • Behavior Treatment Technical Requirement