



Clinical Tech Committee

10-15-09; 3:00-5:00; Towner II, 2140

Community Mental Health Partnership  
of Southeastern Michigan

In Attendance: Sandy Keener, GERALYN Harris, Kathy Dettling, Steve Wiland, Jackie Sproat, Mike Harding, Sheri Kindle

AGENDA ITEM	DISCUSSION POINTS	ACTION/OUTCOME	RESPONSIBILITY
<b>Approval of Minutes</b>	First Meeting		
<b>Review of Charge</b>			
<b>Prioritizing our tasks / forms</b>	Where do we start? Review of past requests. Setting a form agenda so we can have additional people come to the meeting	Jackie will email PCP power point to all members Kathy will invite PCP/SDI members to first meeting Kathy will speak w/ Mary Phillips re: sitting in next PCP meeting which is 11/5	Jackie  Kathy  Kathy
<b>Review of recently submitted items deemed as "urgent"</b>	Request #1 Fax link to G&A          Request #2 Attach SAL to PHR	Mike & Jackie will pull together a complete list of all documents Request #1 – create a list of functions we want standard for all documents (fax, amend, print) for 2.0, and then decide which documents will have what features turned on for whom  Request #2 – Delay until 2.0. There is a current work-around in place.	Mike / Jackie  Jackie will respond to the requestors w/ our decisions

	<p>Request #3 “Eligible but put on wait list”</p> <p>Request #4 “add preferred pharmacy name &amp; phone on demographic field</p> <p>Request #5 ‘add nursing home admission”</p>	<p>Request #3 – Delay until 2.0 Can put info in the disposition &amp; collect data from wait list module</p> <p>Request #4 Not a priority – can wait until 2.0</p> <p>Request #5 Teri to request more info from CFO</p>	<p>Terri</p>
<p><b>Are the right people at the table? Do we need administrative support for making sure the agendas are sent out / the right people are invited?</b></p>	<p>Need to make sure the committees overseeing projects are involved (PCP committee work w/ this group to develop recommendations, Access committee to work on access documents)</p> <p>We need to form an outline in which to review documents – include the following ideas:</p> <ol style="list-style-type: none"> <li>1) We need to follow JCAHO &amp; Medicaid guidelines</li> <li>2) There needs to be the ability to have accurate reporting to DCH, including PI and annual reporting</li> <li>3) The flow of the document should follow the typical clinical process</li> <li>4) Identify and eliminate redundancy</li> <li>5) Identify the signature process / can we use consumer electronic signatures?</li> <li>6) Have the ability to correct any mistakes (its not OK to just leave something because we cant fix it) – There needs to be a back-door way to fix things</li> <li>7) Pre-populate only when it makes sense to</li> <li>8) Keep encompass simple (encompass is very messy due to trying to accommodate changes in processes)</li> <li>9) Demographics entered (not sure what this means?)</li> <li>10) Identify what data are we trying to get from</li> </ol>	<p>Mike wrote up a list of the documents we will prioritize.</p> <p>We will hold off w/ the access document until CSTS develops their process</p>	

	the form 11) Identify areas where we can add outcome measures		
<b>Next meeting: Date / Time / Place</b>	Thursday Nov. 5 <sup>th</sup> 10:30-12 Towner rm 2140	Let Jackie / Mike know if you are attending remotely	

List of “urgent “ requests

1. Add fax link to G&A List, # 1037: When doing a screening at the hospital, the clinician’s laptop is not connected to a printer. This would allow them to fax the appropriate G&A forms to a nearby fax machine to give to the consumer.
2. For Washtenaw, attach a SAL to the PHR, request #1502. Nurses are meeting with clients and entering the PHR data and currently enter a progress note just to be able to SAL the contact.
3. Request #1729, add a new choice on the intake/assessment dispo page for “eligible but put on wait list”.
4. Request # 1661, **add a** "preferred pharmacy name and phone" field on the demographic page-it would cut down on a lot of calls and time spent making them.
5. #1606, **add a** "Nursing Home Admission Date" field in the Residential Arrangement section on the demographic page. Per Monroe CFO this is Urgent to make sure we are in compliance with consumer financials