



Performance Improvement (PI) Committee  
**Meeting Minutes**  
 5-7-09; 1-4pm; LRC

**Learning Organization Principles**  
 SYSTEMS THINKING, SHARED VISION, TEAM LEARNING, PERSONAL MASTERY, MENTAL MODELS

**Ground Rules:**  
 POLITE, TRANSPARENT, INCLUSIVE, SAFE ENVIRONMENT

D. Sabourin, J. Anthony, B. Fowkes, M. Scalera, B. Wilson, V. Stead, **B. Fortune, L. Hall, J. Sahutoglu, N. James-Emerick, J. Laskaska**, CJ Witherow, **D. Healy**, L. Newberg, B. Spalding, **D. Chisholm, P. Cowan, M. Rozich, P. Moise, K. Szewczuk**, A. Kirchner, S. Reitmeier, **M. O'Hare, S. Weary** (*bolded name indicates present at meeting; non-bolded name indicates absent at meeting*)

AGENDA ITEM	DISCUSSION POINTS	ACTION/OUTCOME	RESPONSIBILITY
I. Check In / Approve Minutes & Agenda <b>(ACTION)-1:00p</b>	<ul style="list-style-type: none"> <li>• Check in               <ul style="list-style-type: none"> <li>○ B. Fortune will email the Utilization Review of Readmissions Data Sets to the PI Committee because no printer was available at the LRC.</li> </ul> </li> <li>• Agenda changes               <ul style="list-style-type: none"> <li>○ None</li> </ul> </li> <li>• Minutes changes               <ul style="list-style-type: none"> <li>○ None</li> </ul> </li> </ul>	<b>Agenda and Minutes approved</b>	
II. Breakthroughs, Barriers, Suggested PI Projects (standing item) <b>(DISCUSSION)-1:10p</b>	<ul style="list-style-type: none"> <li>• <b>Incident Report Discussion at AEC</b> <ul style="list-style-type: none"> <li>○ In 2 weeks C. Witherow will have a Compliance Committee work plan. The Compliance Committee has interest in the incident reports accuracy, PI committee recommends that Compliance create a charge for an incident report workgroup.</li> <li>○ Change in status for arrest and conviction</li> <li>○ Sentinel events</li> <li>○ For consideration: PI Liaisons currently review IR Data, but should the Compliance Committee review the IR information first and then it disseminate to PI?</li> </ul> </li> </ul>		
III. Update on Current Projects <b>(DISCUSSION)-2:00p</b>	<ul style="list-style-type: none"> <li>• <b>PI Program Description</b> <ul style="list-style-type: none"> <li>○ The Program Description needs to be authorized by the board.</li> <li>○ AEC approved the use of the current description (with the necessary updates) and have it go to the Board for approval. Enhancements may be made in the</li> </ul> </li> </ul>		

	<p>future.</p> <ul style="list-style-type: none"> <li>○ Network Management is listed as reporting to the PI Committee quarterly, but doesn't. The wording in the description may need to be changed to reflect that Network Management does report regularly. The language of the Network Management section should match of the Behavior Management section.</li> <li>○ The manner in which PI communicates changes and updates to the rest of the affiliation is something that will be worked on going forward.</li> <li>○ M. O'Hare will produce a schedule for reports from committees that are required to report to PI.</li> <li>○ Reports won't necessarily be formal reports filed by the committees, but committees will be expected to provide updates to PI that will be captured in the minutes.</li> <li>○ The PI Program Description will go to Board on Wednesday.</li> </ul> <ul style="list-style-type: none"> <li>● <b>NCQA Update</b> <ul style="list-style-type: none"> <li>○ NCQA has not been fully implemented. In order for it to be meaningful, the WCHO would have to be moving toward a physical health world, where that type of credential is recognized and expected. The mechanisms to get there aren't really feasible.</li> <li>○ Another challenge is that the other CMHs still have to do Joint Commission, so a move to NCQA would require adhering to 2 sets of standards (NCQA and Joint Commission).</li> </ul> </li> <li>● <b>Progress Note Analysis</b> <ul style="list-style-type: none"> <li>○ Jessica provided updates: <ul style="list-style-type: none"> <li>- It has to be determined and agreed upon what "done" means in regard to Progress Notes. There seem to be 2 perspectives: <ul style="list-style-type: none"> <li>▪ The clinical perspective of having information in Encompass right away.</li> <li>▪ The financial perspective of having it counter-signed quickly so that it can become an encounter for billing purposes.</li> </ul> </li> <li>- Another distinction that needs to be made is the aspect of a note being saved vs. counter-signed:</li> </ul> </li> </ul> </li> </ul>		
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	<p>1 indicator might not satisfy both the clinical and financial requirements.</p> <ul style="list-style-type: none"> <li>- A significant number of Progress Notes never become encounters, which has financial implications.</li> <li>- The minimum is 15 minutes for a visit to become an encounter, and there is no billing for a visit of less than 15 minutes. There were more than 700 visits in Washtenaw County in the last 2 quarters between 10-14 minutes, the implication being that these were visits that never became encounters and thus could not be submitted for billing.</li> <li>- Not all ACT teams in other counties have the same problem of visits not becoming encounters. Livingston, Lenawee, and Monroe will go back to their ACT teams to find out how they're able to make their 15 minute minimums.</li> <li>- The issue of 24 hours vs. 1 business day has not been resolved yet. But first the decision must be made as to what stops the Encompass clock: entering/saving a note, signing a note, co-signing a note, etc...</li> <li>- Part of the solution may be to have a 2-pronged project (clinical vs. financial) taken to AEC.</li> </ul>		
<p>IV. <b>(DISCUSSION)- Data Review 2:45</b></p>	<ul style="list-style-type: none"> <li>• <b>MDCH Indicators Q1</b> Nicole reviewed the indicators (see handouts): <ul style="list-style-type: none"> <li>○ Numbers looked good this quarter.</li> <li>○ Some areas needing improvement: <ul style="list-style-type: none"> <li>- 12a: Every county except Monroe had issues this quarter. <ul style="list-style-type: none"> <li>▪ People are aware that this is a problem, and several counties, and UR, will be looking at readmissions. Livingston will start a PI project to look at readmissions.</li> <li>▪ Committee thinks those who are not readmitted should be studied to see what's going right with them, and then apply what's learned to those who have been readmitted.</li> </ul> </li> <li>- 2e: SEMCA's numbers had not looked good in the past. They rechecked their system, and may not have been excluding all the cases they could</li> </ul> </li> </ul> </li> </ul>		

	<p>have, and after double-checking were in compliance this quarter.</p> <ul style="list-style-type: none"> <li>● <b>Dashboard Q2</b> Jessica reviewed some areas in the dashboard: <ul style="list-style-type: none"> <li>○ Page 8: Progress Notes Signed → Livingston is consistently below the other counties and is getting worse.</li> <li>○ Page 10: % of Children in School → Data was being done wrong and has been corrected.</li> <li>○ Page13: All the EBP data is based on state's codes</li> <li>○ There is some financial data in the dashboard now that wasn't there before</li> <li>○ There is data on DD outcomes, but they're not in the dashboard yet because Jessica just got the data yesterday.</li> </ul> </li> </ul>		
V. Work Plan Update	<ul style="list-style-type: none"> <li>● <b>QI Plans for Application for Renewal and Recombitment</b> <ul style="list-style-type: none"> <li>○ The plan is due 6/1/09.</li> <li>○ PI's responsibility: once final Q1 plans are submitted, compare the plans looking for areas that are common and determine which projects can be assigned to which committees.</li> <li>○ PI will need to decide how to distribute projects and ensure that projects move forward. This topic will be on PI's agenda in June for approximately the next 5 months.</li> </ul> </li> <li>● <b>PI Work Plan for 09 - Updates</b> <ul style="list-style-type: none"> <li>○ On page 3, Objective b. "Create a tool or reporting format..." AEC wanted to remove the "collaboration" reference and wanted PI to report what the Affiliation is doing for the community.</li> <li>○ On page 1, Objective b regarding project selections, the plan doesn't indicate that members of the committee can initiate projects, and it should. M.O. will update wording to reflect the change....letter C Under "Specific Activities" letter c does indicate that committee members can initiate projects, but M. O'Hare will reorder the activities to make that more clear.</li> <li>○ J. Sahutoglu requested that "FY" (to indicate "Fiscal</li> </ul> </li> </ul>		

	<p>Year”) be indicated in the title of the work plan to make it clear.</p> <ul style="list-style-type: none"> <li>○ On page 3 big blank part, specific activities haven’t been identified yet for creating a set of measures to evaluate the strength of the Affiliation. <ul style="list-style-type: none"> <li>- The first step may be to establish domains, and then brainstorm possible ways to measure each of the domains, looking for balance and effectiveness for the partnership.</li> </ul> </li> <li>○ On page 3 in the Objective column, instead of “errors” perhaps use “performance opportunities.” In the Specific Activities column use “successes” instead of “errors.”</li> </ul>		
VI. Future Meeting Location <b>(DISCUSSION)</b> – 3:45	<ul style="list-style-type: none"> <li>● LRC vs. Towner <ul style="list-style-type: none"> <li>○ The committee debated the merits of meeting at the LRC vs. moving the meeting to Tower. The parking problems at LRC did not outweigh the LRC’s location’s convenience.</li> <li>○ The committee consensus was that the LRC was the best option.</li> </ul> </li> </ul>	<b>The committee meetings will continue to be held at the LRC.</b>	
VII. <b>Next meeting</b>	<b>6/4/09 1-4p;</b>	<b>Agenda Items</b> <ul style="list-style-type: none"> <li>▪ Q2 PI Report</li> <li>▪ ARR QI Plans Review</li> <li>▪ Project Updates</li> </ul>	Parking Lot <ul style="list-style-type: none"> <li>▪ Customer Measure of Success Tool (developed for all PI Projects)</li> <li>▪ Consumer Driven Dashboard</li> <li>▪ Clinical Guidelines</li> </ul>