

**SAGINAW COUNTY COMMUNITY MENTAL HEALTH AUTHORITY
ENDS COMMITTEE MEETING MINUTES
SEPTEMBER 27, 2021 – 5:15 p.m.
ROOM 190/191**

PRESENT: Tracey Raquepaw, Steve Fresorger, Jane Sills, Jill Armentrout

ABSENT: Cym Winiecke, Jordan Wise

GUESTS:

STAFF: Sandra Lindsey, Colleen Sproul, Ryan Mulder

I. OPENING PROCEDURE

Jill Armentrout, Chair of Ends Committee, called the meeting to order at 5:29 p.m. A quorum was established, and verification of posting was determined.

II. PUBLIC PARTICIPATION

There was no public participation.

III. PROMOTING INTEGRATION OF PRIMARY AND BEHAVIORAL HEALTH CARE (PIPBHC SAMHSA Grant) YEAR TO DATE DATA PRESENTATION

Colleen Sproul, Director of Health Home, Integrated Care and Care Management presented the PIPBHC Year to Date data for the Ends Committee. The following was reviewed:

- Collaboration between SCCMHA and Great Lakes Bay Health Centers (FQHC) is invaluable to becoming a fully integrated practice
- Focus: Recruitment and Retention, Integration, Physical Health Year 3 (Activity->Outputs->Outcomes->Impacts)
- PIPBHC Evaluation Plan – Year 3 (Activity, How Measured, Data Source, Timeframe/Frequency, Parties Responsible for Data, Keep for Year 4?)
- Story from Mary Beth re: consumer served by this integrated arrangement (consumer with diabetes and recent successes)
- Struggle with tracking NOMS data and keeping individuals engaged (partnering with Visiting Nurses Association’s Community Health Workers)
- Sustainability Plan (and our framework and philosophy going forward)

See Ends packet for complete details. The Committee was able to ask questions / make comment.

Motion made by Tracey Raquepaw and supported by Jane Sills to receive and file PIPBHC Year to Date Data Report as presented. Motion Carried.

IV. SCCMHA ANNUAL QUALITY PLAN FOR FY 2021

AmyLou Douglas, Chief Information Officer & Chief Quality and Compliance Officer presented the SCCMHA Annual Quality Plan for FY 2021. Linda Tilot presented the 2020 Quality Report at the June Ends Committee but the FY 2021 Quality Plan was not yet completed. The following was reviewed:

- Michigan Mission Based-Performance Indicator System’s Indicators 2 & 3 Data

- New Quality Coordination Positions
- Development of a Business Intelligence Unit
- Power BI Reporting & upcoming dashboards being used for Quality Improvement
- Business Intelligence Committee is next step for our organization (better integration of information available from Finance, Clinical, Contracts, Operations, etc. to work better together)
- Data Driven Organization (from just having data to using this data to better 'drive' the organization)

See Ends packet for complete details. The Committee was able to ask questions / make comment.

Motion made by Tracey Raquepaw and supported by Jane Sills to receive and file the SCCMHA ANNUAL QUALITY PLAN FOR FY 2021 and recommend to the full Board for approval. Motion Carried.

V. OTHER ITEMS OF IMPORTANCE

VI. ADJOURNMENT

With no other business a motion was made by Jane Sills with support from Tracey Raquepaw to adjourn this meeting at 6:17 p.m. Motion carried.