

**SAGINAW COUNTY COMMUNITY MENTAL HEALTH AUTHORITY
ENDS COMMITTEE MEETING MINUTES
FEBRUARY 22 – 5:00 p.m.**

*Due to the COVID-19 Public Health Emergency this Ends Committee Meeting was held
virtually by telephone.*

PRESENT: Tracey Raquepaw, Kathy Dwan, Steve Fresorger, Jane Sills, Jill Armentrout,
Jordan Wise

ABSENT:

GUESTS:

STAFF: Sandra Lindsey, AmyLou Douglas, Holli McGeshick, Monique Taylor Whitson,
Jennifer Keilitz, Ryan Mulder

I. OPENING PROCEDURE

Jill Armentrout, Chair of Ends Committee, called the meeting to order at 5:00 p.m. A quorum was established and verification of posting was determined.

II. PUBLIC PARTICIPATION

There was no public participation.

III. 2020 YOUTH SERVICES SATISFACTION SURVEY REPORT

Holli McGeshick, Quality Projects & Systems Coordinator presented the 2020 Youth Satisfaction Survey Report. The following was noted:

- SCCMHA Quality Department administered in July 2020
- Overview of Process
- Methodology & Return Rate (1,227 surveys distributed by mail and 149 completed – 12% return rate)
- Respondents were asked to score using 5-Point Likert scale (from 1 to 5)
- Overall Survey Results
- Comments
- This report was reviewed and approved by SCCMHA Quality Governance Council and results posted to SCCMHA website at: <https://www.sccmha.org/about-us/quality/consumer-outcomes.html>
- Quality Improvement Opportunities
- Summary Brochure of Survey Results

The Committee was able to ask questions / make comment. See document for details.

Motion made by Jane Sills and supported by Tracey Raquepaw to receive and file the 2020 Youth Services Satisfaction Survey Report and recommend to the Full Board for approval. Motion Carried.

IV. 2020 ADULT CONSUMER SATISFACTION SURVEY REPORT

Holli McGeshick, Quality Projects & Systems Coordinator presented the 2020 Adult Consumer Satisfaction Survey Report. The following was noted:

- SCCMHA Quality Department administered in July 2020

- Overview of Process
- Methodology & Return Rate (2,920 surveys distributed by mail and 500 completed - 17% return rate)
- Respondents were asked to score using 5-Point Likert scale (from 1 to 5)
- Overall Survey Results
- Comments
- This report was reviewed and approved by SCCMHA Quality Governance Council and results posted to SCCMHA website at: <https://www.sccmha.org/about-us/quality/consumer-outcomes.html>
- Quality Improvement Opportunities
- Summary Brochure of Survey Results

The Committee was able to ask questions / make comment. See document for details.

Motion made by Jane Sills and supported by Kathy Dwan to receive and file the 2020 Adult Consumer Satisfaction Survey Report and recommend to the Full Board for approval. Motion Carried.

V. 2020 PROVIDER AUDIT PERFORMANCE REPORT

Monique Taylor-Whitson / Jennifer Keilitz presented the 2020 2020 Provider Audit Performance Report. The following was noted:

- Regular Annual Onsite Audit conducted by Monique Taylor-Whitson's Auditing Unit
- Standards / Audit Checklists are annually reviewed by the SCCMHA Service Management Team
- SCCMHA works with MSHN to complete reciprocity reviews for providers
- 29 Audits conducted (areas scored 0 – 2) and then converted to a percentage
- 95% or higher is considered "in compliance"
- Follow up visits for providers at lower than 80% are required 6 month follow up, lower than 70% requires 4 month & 7 month follow up reviews to review corrective action plans.
- Performance Audit scores reviewed – Average Audit Score for Total Number of Audits Completed was 91%

The Committee was able to ask questions / make comment. See document for details.

Motion made by Tracey Raquepaw and supported by Jane Sills to receive and file the 2020 Provider Audit Performance Report and recommend to the Full Board for approval. Motion Carried.

VI. 2020 EVENT VERIFICATION REPORT

Jennifer Keilitz presented the 2020 Provider Audit Performance Report. The following was noted:

- Introduction & Background
- MSHN Medicaid and Healthy Michigan Services Verification Instructions
- Event Verification Methodology Summary
- Event Verification Scope
- Event Verification Findings & Analysis (FY 20 – 10,864# of events reviewed / **96.94%** of events verified & FY 19 – 9, 493# of events reviewed / 96.94.03% of events verified)

- Disallowed Amounts Summary (**\$55,666.09** in FY 20 / **\$42,267.35** in FY 19)
- Repeat Deficiencies Summary
- Data Analysis Summary
- Event Verification Goals for FY 2021

The Committee was able to ask questions / make comment. See document for details.

Motion made by Kathy Dwan and supported by Steve Fresorger to receive and file the 2020 Event Verification Report and recommend to the Full Board for approval. Motion Carried.

VII. OTHER ITEMS OF IMPORTANCE

Sandy noted that SCCMHA is pursuing vaccinations for staff and consumers whenever possible.

VIII. ADJOURNMENT

With no other business a motion was made by Tracey Raquepaw with support from Steve Fresorger to adjourn this meeting at 5:52 p.m. Motion carried.