
Category: **QUALITY IMPROVEMENT**
Title: **QUALITY IMPROVEMENT PROGRAM**

Prior Approval Date: 6/19/08
Current Approval Date: 11/29/11

Approved by: _____ Executive Director _____ Date 11/29/11

I. Abstract

This policy establishes the standards and procedures for the Macomb County Community Mental Health (MCCMH) Board's approved Quality Assessment and Performance Improvement Program (QAPIP).

II. Application

This policy shall apply to all MCCMH administrative/management staff, direct service individual service contractors, and direct and contract network providers of the MCCMH Board.

III. Policy

It is the policy of MCCMH that the QAPIP, adopted by the MCCMH Board, be adhered to in order to continuously improve the outcomes of care and services provided to consumers of the MCCMH Board.

IV. Definitions

A. None.

V. Standards

- A. The MCCMH QAPIP shall be approved by the MCCMH Board.
- B. The QAPIP shall be managed by the Executive Staff, chaired by the MCCMH Executive Director, and include Directors of each MCCMH Division, and other representation as needed. The meetings of the QAPIP shall be held separately from regular Executive Staff meetings.
- C. The Clinical Risk Management Committee shall be a formal standing committee within the QAPIP.
- D. The directly-operated programs' QA Committee and its subcommittees shall be a formal standing committee within the QAPIP.

- E. Quality Action Teams shall be ad hoc, time-limited, and topic-focused Quality Improvement committees.
- F. Input to the Quality Improvement Program shall be obtained from multi-functional internal and external sources to address the purposes of the QAPIP.
- G. The records, data, and knowledge collected by and for the QAPIP shall only be used for the purposes of peer review, and are protected QA documents / information subject to the confidentiality safeguards of MCL 330.1748.

VI. Procedures

- A. MCCMH, through the Quality Assessment and Performance Improvement (QAPI) Annual Plan, shall establish and monitor Key Performance Indicators (KPI) which will continuously measure and assess all dimensions of MCCMH's service delivery system.
- B. The QAPIP shall incorporate the results of other MCCMH task forces, work groups and standing committees and obtain consumer input through the review of customer satisfaction results, data from consumer and provider focus groups, and input from the Citizens Advisory Council (CAC), Substance Abuse Advisory Council (SAAC), the Human Services Coordinating Body (the State-designated Multi-Purpose Coordinating Body) and advocacy and stakeholders of Macomb County.
- C. The Clinical Risk Management Committee shall review areas of clinical risk to MCCMH consumers, including Recipient Rights Incident Reports, Medication Errors, summary Behavior Management Data from direct and contract providers, and Sentinel Events.
- D. Quality Action Teams may be established to solve specific quality concerns.
- E. The MCCMH Board shall review and approve the MCCMH QAPIP and, annually, the annual QAPI Plan, including the identification and prioritization of KPIs.
- F. Reports on the MCCMH QAPIP shall be provided to the MCCMH Board not less than annually.
- G. The MCCMH Board shall submit the written annual report to MDCH following its review. The report shall include a list of members of the MCCMH Board.
- H. The Quality Council, the Citizens Advisory Council, the Substance Abuse Advisory Council, and the MCCMH Board shall periodically review the two Performance Improvement Projects.
- I. The MCCMH Executive Staff shall perform the functions of quality management, including reviewing quality concerns, performance improvement reports, etc., which may require administrative action.

VII. References / Legal Authority

- A. MDCH - MCCMH Medicaid Managed Specialty Supports and Services Contract
FY 12, Attachment P6.7.1.1

VIII. Exhibit

- A. None.