Affiliation: Northwest CMH Affiliation Quality Improvement Plan Overview

## DESCRIPTION AND SUMMARY

The Northwest CMH Affiliation remains firmly committed to the principles espoused in the Application for Participation submitted in 2002. This Application for Renewal and Recommitment to Quality and Community in the Michigan Public Mental Health System reflects upgrades implemented and planned in our quality efforts to ensure people are provided options that best fit their preferences and support to achieve true community membership. We welcome this invitation to set a course to improve statewide equity of service opportunity and quality of service outcome. Secondarily, but of particular importance at a time of funding reductions, we also look to achieve administrative efficiencies and clinical efficacies.

The Northwest CMH Affiliation has experienced structural change since its formation in 2002. Originally configured through a joint operating agreement between three CMHSPs, Great Lakes CMH, North Central CMH and West Michigan CMH System, the organization is now comprised of two affiliates as North Central and Great Lakes merged to form Northern Lakes CMH. Northern Lakes serves as the hub in this arrangement and is the PIHP doing business as the Northwest CMH Affiliation. Under contract Northern Michigan Substance Abuse Services continues to manage the Medicaid SA benefit as the Coordinating Agency. This change has necessitated certain procedural changes in plans since the AFP submission but the functions and committee structures remain essentially the same as originally submitted.

Conforming to our largely decentralized model and respectful of differences in local communities in our nine county affiliation area, we conducted our environmental scans in a coordinated but delegated fashion. The attached Quality Improvement plans reflect differences in findings and performance as well. Each of the affiliate CMHSPs conducted their scans in their local areas utilizing a common tool but with minor variations in practice. Northern Lakes solicited consumer, family member, advocate, and stakeholder feedback from already composed groups including the Consumer Advocacy Council and at the Network Provider meeting on April 9. The Application for Renewal and Recommitment initiative was presented to the Consumer Advocacy Council and members were invited to participate in the environmental scans. Three day long community forums were also held in Traverse City, Cadillac and Houghton Lake where information relative to historical performance on the eleven topic areas was shared and feedback solicited, compiled and organized into the attached submission. Participation was extensive with sixty-eight registered attendees, all of whom will be provided copies of the plan upon request. West Michigan CMHS prepared information for the Environmental Scans from data reports and information gathered over the past year. The report was presented to the Consumer Advisory Panel and WMCMHS Board which includes primary and secondary consumers. Additionally feedback on performance from a variety of stakeholder groups and committees, whose members are consumers, advocates and community members, was included. We found this process to be very beneficial in our planning and response from participants was overwhelmingly positive as well. We remain committed to a full partnership

with consumers, family members, advocates and stakeholders and intend to conduct future forums to ensure full community participation.

It should be noted that while the Attachment A template reflects milestones and time frames unique to the affiliate CMHSPs, based on variations in development and implementation between affiliates, the plan is very much a PIHP plan, submitted and monitored by the Northwest CMH Affiliation.

Our plans build on current structures, policies and practices and a commitment to a process of continuous quality improvement at the local CMHSP level and quality oversight and monitoring by the PIHP. The plans in several topic areas reference the Program Policy Guidelines and the tables and work plans submitted in April by the respective CMHSPs. Contingent upon funding, it is our intent to implement all plans according to the identified developmental timelines. Our affiliate members' plans reflect some variance in the current status in the topic areas and plans and timelines for implementation and quality improvement methods vary according to need, and reflect differences in the stages of development of Systems of Care in local communities.

We are proud of our performance to date in most areas and are assured by the findings of the MDCH at annual site reviews and by the findings of the External Quality Reviewer, the Health Services Advisory Group. That said, we recognize the need for improvement particularly in the areas of Supported Employment and Self Determination and plan to focus our attention on these areas. We have a demonstrated history of consumer and stakeholder involvement, compliance with contract and technical requirements and a strong commitment to quality community based care. We believe this process of renewal and recommitment will help us focus on our priorities as we continue our efforts at system transformation. We also recognize the very real threat of funding reductions and constraints but are committed to implementation of our plans subject to any significant funding reductions.

We thank you for this opportunity to participate and look forward to your review and feedback.