

Date October 25, 2022

<b>Meeting Called By</b>	Diane Berth				
<b>Type of Meeting</b>	Web-Ex				
ATTENDEES					
NAME	Present	NAME	Present	NAME	Present
Dr. Michael Smith Chief Medical Officer Trillium	<input type="checkbox"/>	Rachel Jordan * ICF/IDD Provider QM Director - Carobell	<input checked="" type="checkbox"/>	Krissy Vestal Head of Performance Improvement Trillium	<input checked="" type="checkbox"/>
Kimberly Ennis * Hospital Representative ECU Medical Center	<input checked="" type="checkbox"/>	Lucy Wilmer* Central Regional CFAC	<input type="checkbox"/>	Dee Pankey Thompson* IDD Provider GHA Autism Supports	<input type="checkbox"/>
English Albertson * IDD Provider/Provider Council Representative Primary Health Choice	<input checked="" type="checkbox"/>	Vacant * Network Prescriber	<input type="checkbox"/>	Frank Messina * Southern Regional CFAC	<input checked="" type="checkbox"/>
Fonda Gonzales, LCMHC Director of Quality Management Trillium	<input type="checkbox"/>	Louise Winstead * MH Adult Provider Monarch	<input type="checkbox"/>	Diane Berth * Licensed Independent Practitioner	<input checked="" type="checkbox"/>
Martha Green * Northern Regional CFAC Halifax Hospital	<input type="checkbox"/>	Lindsay Joines * SU Provider Coastal Horizons	<input type="checkbox"/>	Rashel Lauret * MH Child Provider NC Rapid Source	<input checked="" type="checkbox"/>
Dr. Paul Garcia Staff Physician (Alternate for Dr. Smith)	<input type="checkbox"/>	David Tart * SU Provider Integrated Family Services	<input checked="" type="checkbox"/>	Tyrell Roberts Senior. Data Analyst	<input checked="" type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>

\*Represents Voting Members

**AGENDA**

**1. Agenda topic: Open Meeting and Introductions**

**Presenter(s): Diane Berth**

<b>Discussion</b>	<ul style="list-style-type: none"> <li>• Diane opened the meeting and each participant introduced themselves sharing the role of their agency and population served.</li> <li>• A quorum was present for today's meeting.</li> <li>• Krissy shared that Trillium was holding a Pep Rally today and some Trillium members are attending that .</li> </ul>				
<b>Conclusions</b>	<ul style="list-style-type: none"> <li>• The meeting was opened and committee member details were shared.</li> <li>• There were no questions or concerns identified for follow-up or items recommended for corrective action.</li> </ul>				
<b>Action Items</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Person(s) Responsible</th> <th style="width: 40%;">Deadline</th> </tr> </thead> <tbody> <tr> <td>• There were no items identified for follow-up.</td> <td></td> </tr> </tbody> </table>	Person(s) Responsible	Deadline	• There were no items identified for follow-up.	
Person(s) Responsible	Deadline				
• There were no items identified for follow-up.					

**2. Agenda topic: Agenda Review and Approval**

**Presenter(s): Diane Berth**

<b>Discussion</b>	<ul style="list-style-type: none"> <li>The agenda was presented with one change to #9 Tailored Plan (TP) Update; Dr. Smith is not in attendance today and has sent info to Krissy that the only update is TP has been pushed to 4/1/2023.</li> </ul>				
<b>Conclusions</b>	<ul style="list-style-type: none"> <li>The agenda was approved with the change noted above with a motion by David and a second by Kimberly and all were in favor.</li> <li>There were no questions or concerns identified for follow-up or items recommended for corrective action.</li> </ul>				
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**3. Agenda topic: Follow-up Items****Presenter(s): Diane Berth**

<b>Discussion</b>	<ul style="list-style-type: none"> <li>Susan – Forward Jan 26, 2022 &amp; May 2, 2022 minutes to Yanira to post on Trillium’s website. <b>Completed. The minutes were posted to Trillium’s website.</b></li> <li>Susan – Email members on the decision regarding signing annual forms. <b>Completed. An email was sent to the GOIC membership regarding the annual forms decision on 10/20/22.</b></li> <li>Diane/Frank - Finalize 22-23 GOIC Work Plan. <b>Completed and signed.</b></li> <li>All Members – Volunteers to present their agency QIA in Oct, contact Krissy or Diane. <b>Ongoing. There were no volunteers for this item, but we will continue to request volunteers to present.</b></li> <li>Krissy – F/u with new format for Monthly Summary of Quality of Care Grievance info. <b>Providers were issued a number and data was sorted by number to indicate which providers had two or more Quality of Care incidents. This was added to the dashboard and a detailed log of grievances will also be shared in today’s meeting.</b></li> </ul>				
<b>Conclusions</b>	<ul style="list-style-type: none"> <li>All open follow-up items from the July 26, 2022 meeting were completed.</li> <li>There were no other questions or concerns identified for follow-up or items recommended for corrective action.</li> </ul>				
<b>Action Items</b>	<table border="1"> <thead> <tr> <th>Person(s) Responsible</th> <th>Deadline</th> </tr> </thead> <tbody> <tr> <td>• Continue to ask for volunteers to present their agency QIA’s.</td> <td>ongoing</td> </tr> </tbody> </table>	Person(s) Responsible	Deadline	• Continue to ask for volunteers to present their agency QIA’s.	ongoing
Person(s) Responsible	Deadline				
• Continue to ask for volunteers to present their agency QIA’s.	ongoing				

**4. Agenda topic: Meeting Minutes Review and Approval****Presenter(s): Diane Berth**

<b>Discussion</b>	<ul style="list-style-type: none"> <li>The July 26, 2022 minutes were presented and approved as written with a motion by Rachel and second by Kimberly with all members in favor.</li> </ul>				
<b>Conclusions</b>	<ul style="list-style-type: none"> <li>The July 26, 2022 minutes were unanimously approved by the membership.</li> <li>July 26, 2022 minutes will be emailed to the Communications Department to post to Trillium’s website.</li> <li>There were no other questions or concerns identified for follow-up or items recommended for corrective action.</li> </ul>				
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Person(s) Responsible	Deadline				

<ul style="list-style-type: none"> <li>Forward GOIC July 26, 2022 minutes to Yanira Nunez to post on the Trillium website</li> </ul>	Susan	ASAP
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#### 5. Agenda topic: GOIC 2022-2023 Work Plan Update

Presenter(s): Diane Berth

Discussion	<ul style="list-style-type: none"> <li>Diane presented and reviewed the updated 22-23 GOIC Work Plan. Each activity was reviewed in detail and Diane shared that this is our first meeting with the new work plan. The Work Plan is updated with recommended changes/revisions after each meeting.</li> </ul>						
Conclusions	<ul style="list-style-type: none"> <li>Diane requested that members check their contact information posted on Trillium's website to confirm that it is correct.</li> <li>Diane will remove the fifth goal under the second activity as it is already addressed in the first goal.</li> <li>The work plan may have additions with the implementation of TP.</li> <li>There were no questions or concerns identified for follow-up or items recommended for corrective action.</li> </ul>						
Action Items	<table border="1"> <thead> <tr> <th></th> <th>Person(s) Responsible</th> <th>Deadline</th> </tr> </thead> <tbody> <tr> <td> <ul style="list-style-type: none"> <li>Remove the 5<sup>th</sup> goal under the second activity on the work plan</li> </ul> </td> <td>Diane</td> <td>Jan Mtg.</td> </tr> </tbody> </table>		Person(s) Responsible	Deadline	<ul style="list-style-type: none"> <li>Remove the 5<sup>th</sup> goal under the second activity on the work plan</li> </ul>	Diane	Jan Mtg.
	Person(s) Responsible	Deadline					
<ul style="list-style-type: none"> <li>Remove the 5<sup>th</sup> goal under the second activity on the work plan</li> </ul>	Diane	Jan Mtg.					

#### 6. Agenda topic: Trillium QIP/QIA Updates

Presenter(s): Krissy Vestal

	<ul style="list-style-type: none"> <li><b>TCL QIA</b> <ol style="list-style-type: none"> <li>Measurement #44 (Sep 2022) is new. Threshold of 98% (or higher) was <i>not met</i> for Sep 2022; the rate slightly decreased since last month.</li> </ol> </li> <li><b>Utilization of MST QIA</b> <ol style="list-style-type: none"> <li>Measurement #11 (Apr-Jun 2022) is new and was presented to GOIC. The project goal of 14.7% was not met.</li> </ol> </li> <li><b>Utilization of ED QIA</b> <ol style="list-style-type: none"> <li>Measurement #11 (Apr-Jun 2022) is new. The project goal for Measure #1 and Measure #3 were not met. The project goal for Measure #2 was met.</li> <li>Trillium has met the project goal of 80% for Measure #2 for twelve consecutive months; in turn, QIC voted to close this section of the QIA and to discontinue monitoring of Measure #2.</li> </ol> </li> <li><b>Mental Health 1-7 Day Follow-up QIA</b> <ol style="list-style-type: none"> <li>Validated State data was received for Measurement #16 (Jan-March 2022) for DMH only. DMH did not meet the project goal of 45%.</li> <li>Validated State data has not yet been received for Measurement #15 (DHB only), #16 (DHB only), #17, and #18; therefore, these measurements represent local data at this time.</li> </ol> </li> <li><b>Substance Use 1-7 Day Follow-up QIA</b> <ol style="list-style-type: none"> <li>Validated State data was received for Measurement #16 (Jan-Mar 2022) for DMH. DMH did not meet the project goal of 45%.</li> <li>Validated State data has not yet been received for Measurement #15 (DHB only), #17 and #18; therefore, these measurements represent local data at this time.</li> </ol> </li> </ul>
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<b>Conclusions</b>	<ul style="list-style-type: none"> <li>• Krissy shared that our Quality Improvement Projects (QIPs) title will be changing to Performance Improvement Projects (PIPs) with the implementation of TP. The formatting will be different and the PIPs will be related to HEDIS measures and other activities.</li> <li>• For the Utilization of MST QIA – Krissy will follow-up on Diane’s question regarding identifying the barriers for this QIA (rural area, service availability, etc.,)</li> <li>• There were no other questions or concerns identified for follow-up or items recommended for corrective action.</li> <li>• All current interventions will continue.</li> </ul>		
<b>Action Items</b>	<b>Person(s) Responsible</b>	<b>Deadline</b>	
<ul style="list-style-type: none"> <li>• Utilization of MST QIA – F/u on identifying barriers (rural areas, MST Services availability, etc.,)</li> </ul>	Krissy	Jan Mtg.	

#### 7. Agenda topic: Provider Satisfaction Survey

Presenter(s): Krissy Vestal

<b>Discussion</b>	<ul style="list-style-type: none"> <li>• Krissy shared the new format for presenting results from the Provider Satisfaction Survey for 2021. Providers of Medicaid Waiver Services were surveyed by the state to assess how well Trillium is meeting provider expectations. There was a 56.1% provider response rate with an overall satisfaction score of 92.5%. Strengths results were as follows: credentialing staff are friendly and knowledgeable; investigations are thorough and fair; providers are kept informed of changes and corrective action plans are fair and reasonable. Opportunities for Improvements were as follows: staff are not easily accessible/responsive to needs; providers are not given accurate/consistent information and communications are not informative and helpful for providers. These results were shared with departments to discuss improvements. One example is Trillium has implemented Urgent Communications to send to providers regarding information they need for upcoming changes. The hours for the Provider Support Service Line were extended in June. Frank inquired when consultant providers provide services to other providers is there any oversight on the outcome. Krissy shared that Trillium’s Network Department does conduct oversight within the service definitions.</li> </ul>		
<b>Conclusions</b>	<ul style="list-style-type: none"> <li>• Diane and Frank will have an off line discussion regarding his concerns.</li> <li>• There were no other questions or concerns identified for follow-up or items recommended for corrective action.</li> </ul>		
<b>Action Items</b>	<b>Person(s) Responsible</b>	<b>Deadline</b>	
<ul style="list-style-type: none"> <li>• There were no items identified for follow-up</li> </ul>			

#### 8. Agenda topic: GQIC First Quarter Data Report

Presenter(s): Krissy Vestal

<b>Discussion</b>	<ul style="list-style-type: none"> <li>• Krissy presented and reviewed the GQIC’s First Quarter Data Report Jul-Sep 2022. The average number of grievances per month this FY has been 16, totaling 48 so far. There were 161 total grievances for FY 21-22, and the average number of grievances per month was 16. Most grievances were on behalf of members (92%) this quarter, consistent with previous quarters. Of</li> </ul>		
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	<p>identified service areas, members assigned to the MH-only category led in the number of grievances, accounting for 23% of all grievances. Grievances against the LME were primarily distributed across the categories of attitude and service, access, and quality of care. Approximately 40% of this quarter's grievances were due to attitude and service concerns. Three quality of care grievances were investigated and all were unsubstantiated. Approximately 51% of grievances against providers were due to quality of care. Two providers received more than two quality of care grievances this quarter. Krissy noted the additional table on Page 6 for Providers with two or more quality of care grievances by provider code. The breakdown of grievances by quarter (Jul-Sep 2022) log was also reviewed by Krissy to coincide with the table on Page 6. There were 22 investigations conducted so far this quarter. Of the 22 grievances 18 were substantiated, two and two were partially substantiated. The average this FY is 163 incidents per month so far, still lower than the combined average of 221 incidents per month for FYs 18-22 and the last FY's average of 202 incidents per month. Approximately 80% of incidents in this quarter were Level II events, on-trend with last year's 82%. The majority of incidents were among the CMH population. The top two events this quarter were member behavior incidents and restrictive interventions. There have been a total of 42 and an average of 14 deaths per month this FY. Most deaths from this FY are still pending cause of death and thus categorized as "unknown cause". Of the known causes of death, terminal illness/natural causes is the top category. There were no medication errors reported this FY. Routine Monitoring for this quarter resulted in two providers receiving technical assistance, no POC's and there were no trends to report.</p>	
<b>Conclusions</b>	<ul style="list-style-type: none"> <li>• Krissy shared that the table on Page 4 regarding Grievances on Behalf of Member was incorrect and she will assure it is revised.</li> <li>• There were no additional questions or concerns identified for follow-up or items recommended for corrective action.</li> </ul>	
<b>Action Items</b>	<b>Person(s) Responsible</b>	<b>Deadline</b>
<ul style="list-style-type: none"> <li>• Correct table on Page 6 Grievances on Behalf of Members</li> </ul>	Krissy Vestal	Jan Mtg.

#### 9. Agenda topic: Tailored Plan and Trillium Updates

Presenter(s): Dr. Smith

<b>Discussion</b>	<ul style="list-style-type: none"> <li>• <b>Tailored Plan/Trillium Updates – Dr. Smith</b> Dr. Smith was unable to present/attend the meeting today. TP has been pushed back to April 2023 and there are no other updates at this time.</li> </ul>	
<b>Conclusions</b>	<ul style="list-style-type: none"> <li>• There were no other questions or concerns identified for follow-up or items recommended for corrective action.</li> </ul>	
<b>Action Items</b>	<b>Person(s) Responsible</b>	<b>Deadline</b>
<ul style="list-style-type: none"> <li>• There were no items identified for follow-up</li> </ul>		

#### 10. Agenda topic: Open Agenda/Round Table Discussion

Presenter(s): All Members

<b>Discussion</b>	<ul style="list-style-type: none"> <li>• There were open agenda items for discussion</li> </ul>
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<b>Conclusions</b>	<ul style="list-style-type: none"> <li>There were no open agenda items for discussion</li> </ul>		
<b>Action Items</b>	<b>Person(s) Responsible</b>	<b>Deadline</b>	
<ul style="list-style-type: none"> <li>There were no items identified for follow-up</li> </ul>			

### Meeting Adjourned

**Next Meeting Date:** January 24, 2023

(All meetings convene from 10am – 12pm)

**Supporting Document/Attachment for Minutes:**

Agenda Oct 2022

QIA Grid & Graphs Oct 2022

First Qtr. 22-23 GQIC Data Report Jul-Sep 2022

GQIC Work Plan 2022-2023

Jul 26, 2022 GQIC Minutes

Provider Satisfaction Survey Results Flyer 2021

Grievance Log Jul-Sep 2022

*Submitted by Susan Massey*