



ANNUAL REPORT FY 2023





EXECUTIVE DIRECTOR'S NOTE

Fiscal Year 2023 has brought changes to HealthWest. The agency transitioned out of the pandemic and worked towards bringing everyone back to the office. Seeing staff work face-to-face again was a refreshing experience for many. In June, HealthWest welcomed a new director, introducing a mix of excitement and some apprehension about anticipated changes. Despite this, HealthWest kept its operations running smoothly and met all external requirements, including completing the Annual Report for FY22. Like the previous year, HealthWest continued to build on its many accomplishments in serving the community and fulfilling its vision and mission: "To be a leader in integrated health care, inspiring hope and wellness in partnership with individuals, families, and the community."

Under new leadership, HealthWest concentrated on internal evaluations and operations in the second half of FY23. This included developing a comprehensive Quality Improvement framework, training key personnel and leadership in Quality Improvement, and establishing a visible Quality Improvement team that met regularly. FY23 also saw the strengthening of the Compliance Committee, comprising of members from various areas of HealthWest who met regularly.

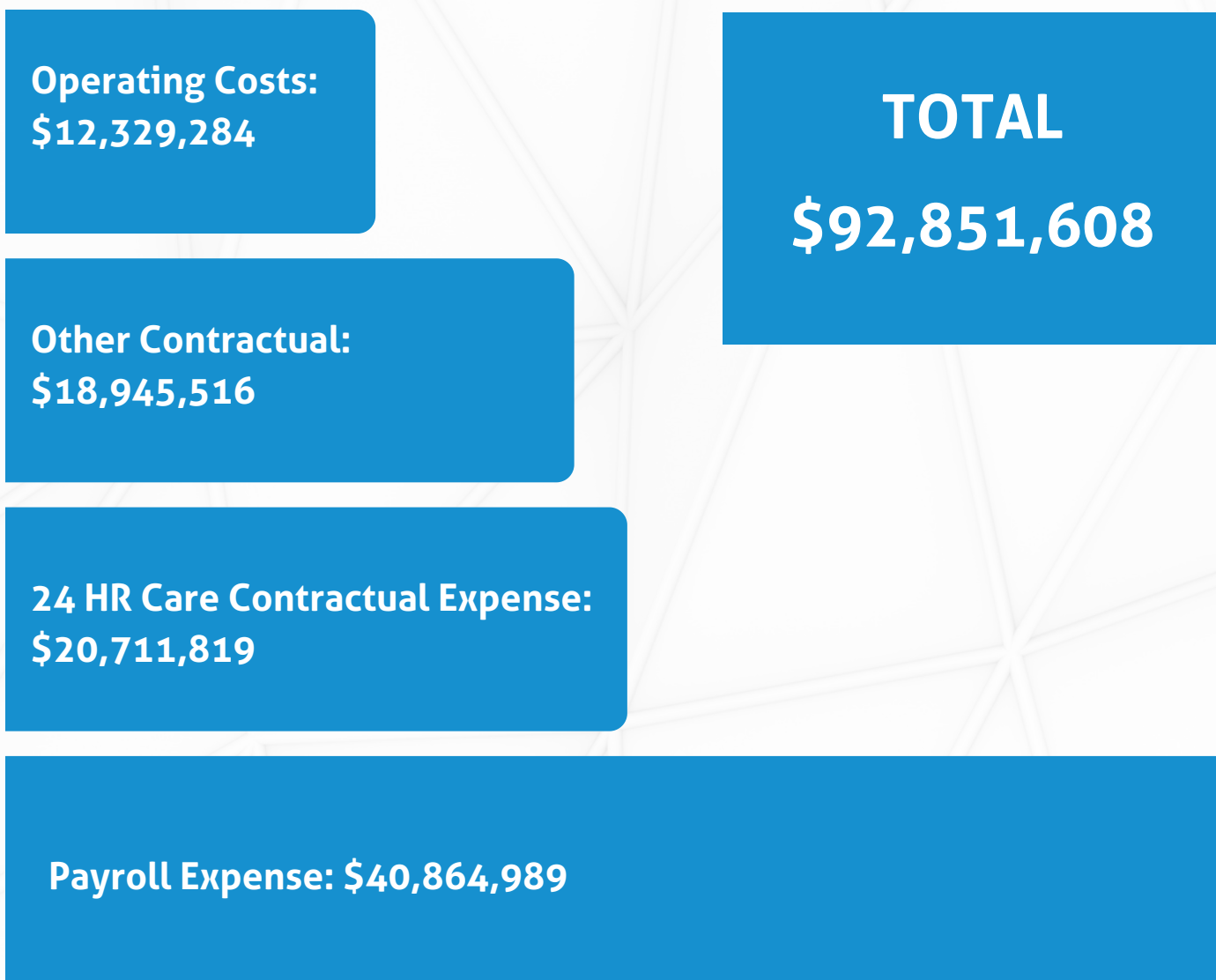
In a short time with new leadership, HealthWest not only met all FY23 requirements but excelled in them. The data and information in this report highlight the accomplishments and events of the past year. A heartfelt thank you to the leadership team, supervisors, managers, and especially the dedicated staff at all levels for their daily commitment. Thank you for working together to build the best CMH and achieving superior outcomes through trust, transparency, and collaboration.

FY 2023 FINANCIALS

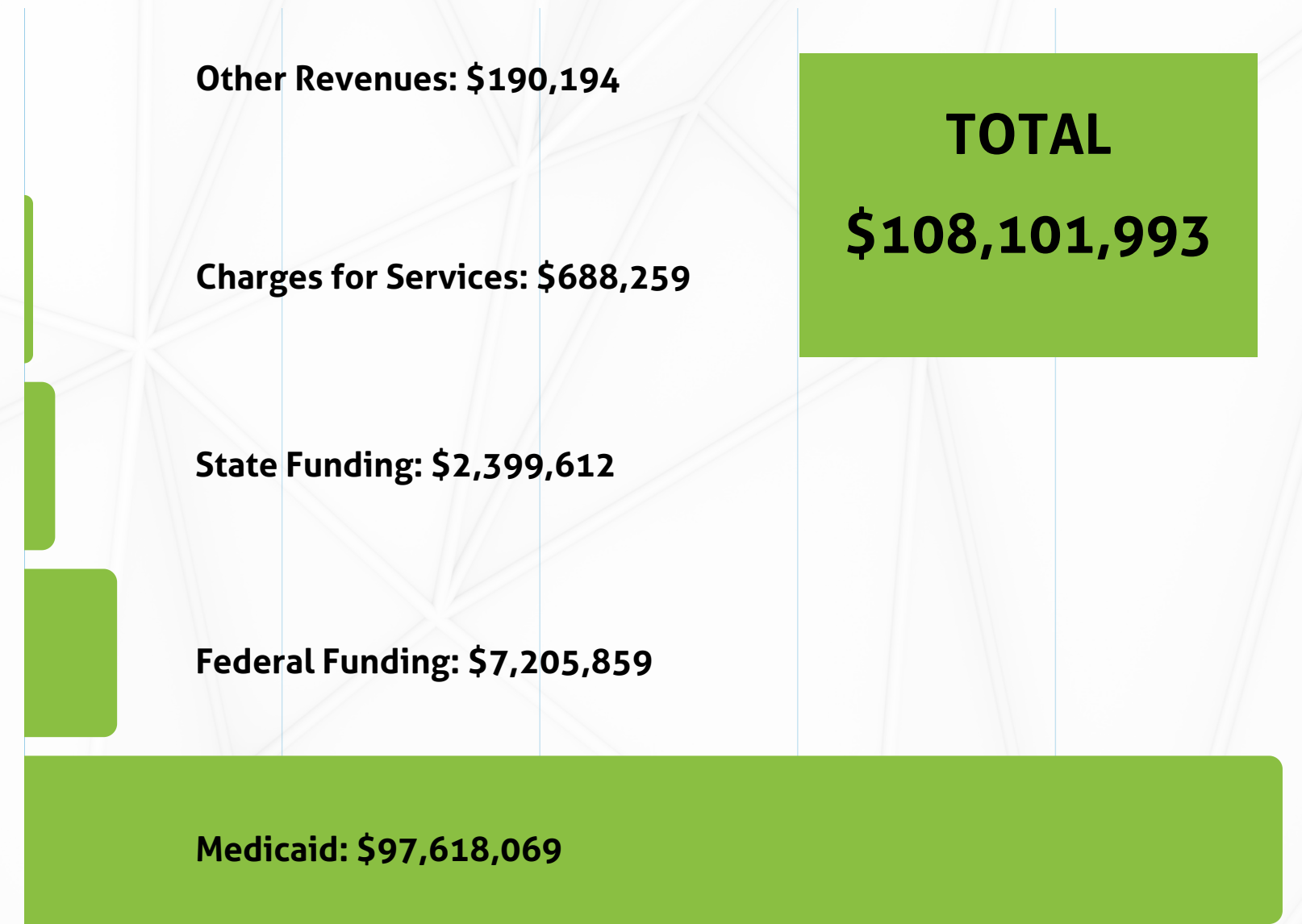
Expenditures for the year represented an increase of \$10.25 million, or 12.41% over the prior fiscal year. Expenditures to be covered by Medicaid specialty supports and services funding of \$84.9 million represents 91.4% of the total. Expenditures to be supported by State General Fund priority population funding of \$2.4 million represents 2.58% of total expenditures. Grants and earned contract revenue include revenue sources for which the use of funds is restricted to a specific purpose. County appropriation revenue, interest income, and other local income are available to meet state matching fund requirements. The County's local match maintenance of effort appropriation remained the same at \$706,819 from Fiscal Year 2022.

HealthWest was able to secure payment of 80% of its past financial liabilities (\$12,703,117) from the Lakeshore Regional Entity. The remaining 20% of moneys owed (\$2,482,170) has been placed in a protected account that will be released to HealthWest on May 23.

ANNUAL EXPENSE BY CATEGORY

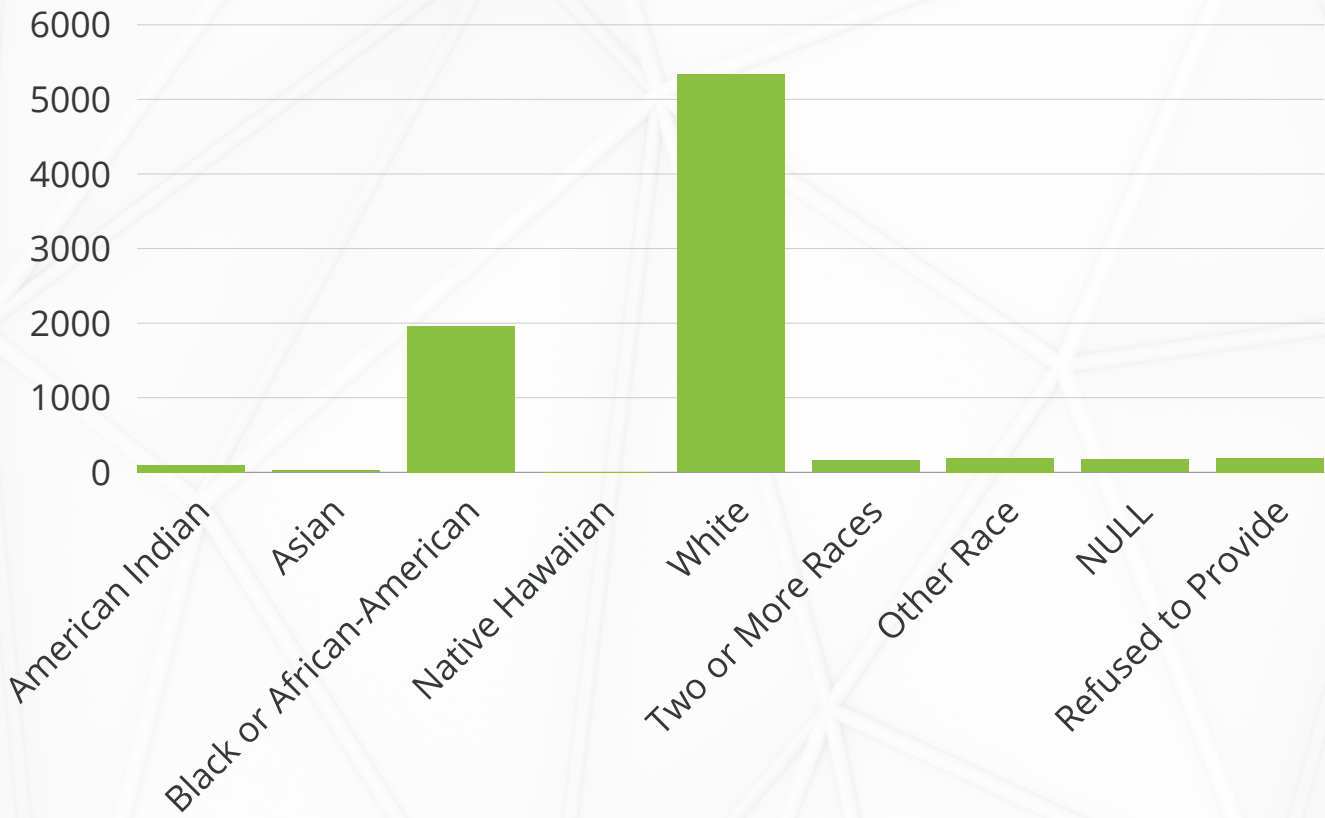


SOURCES OF FUNDING

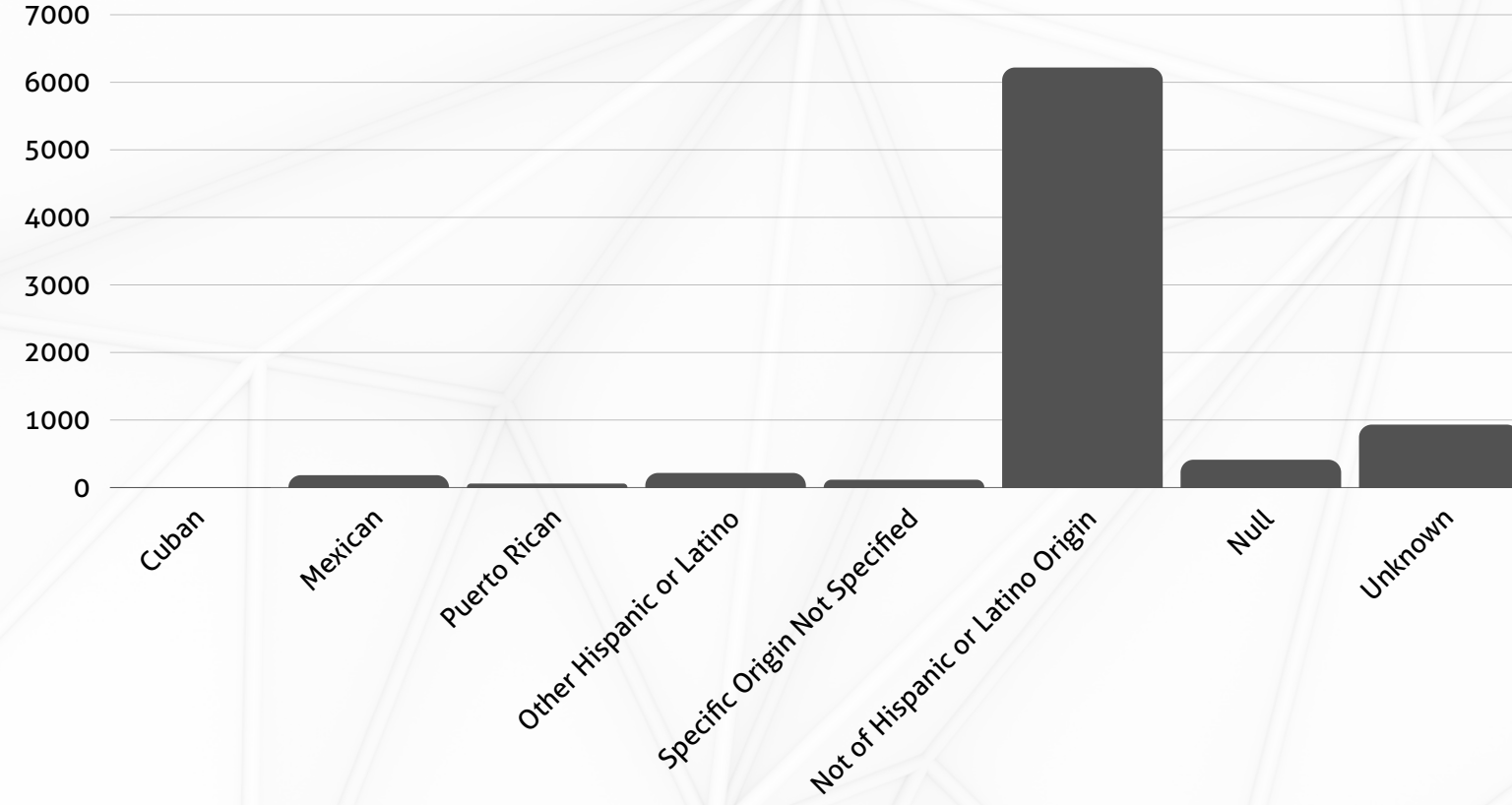


TOTAL SERVED: 8,143

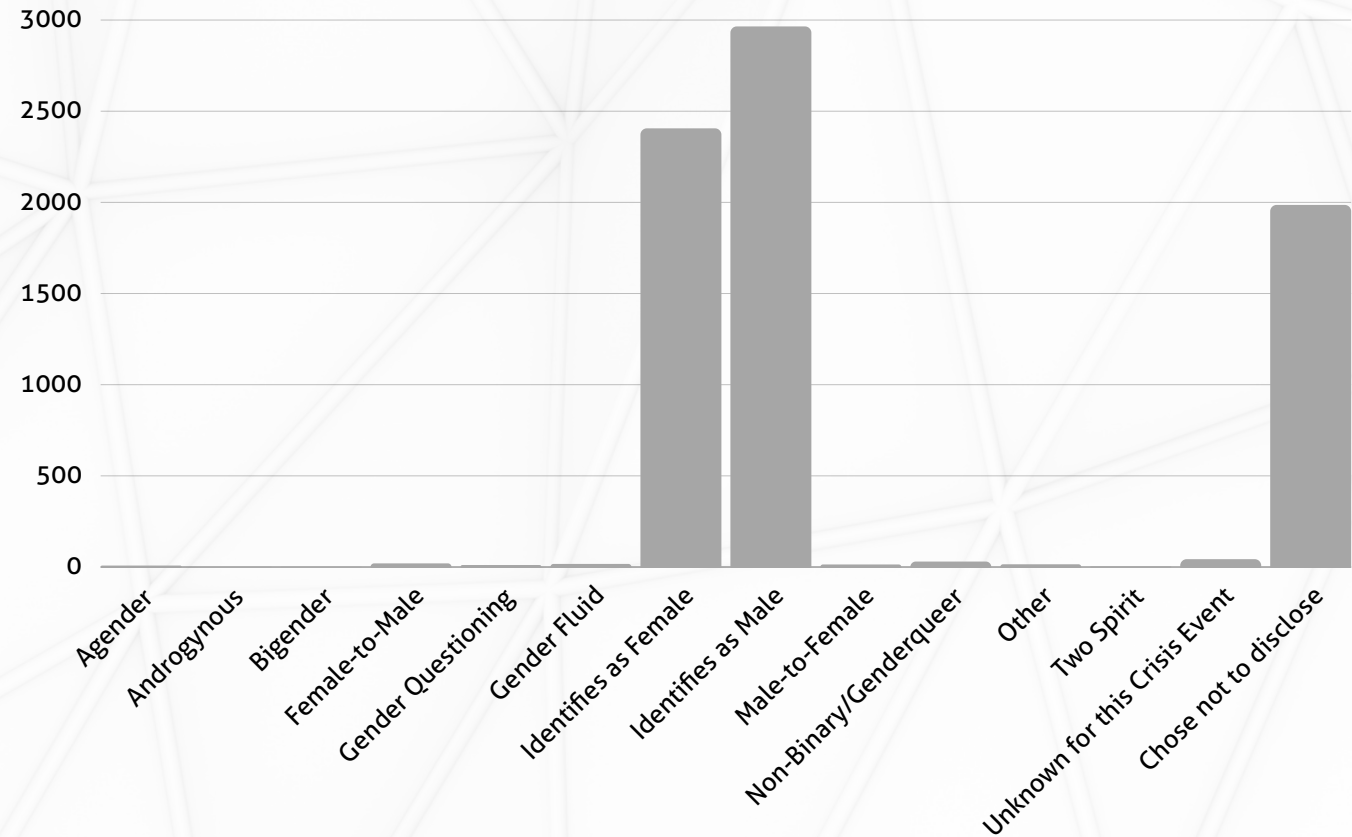
Race



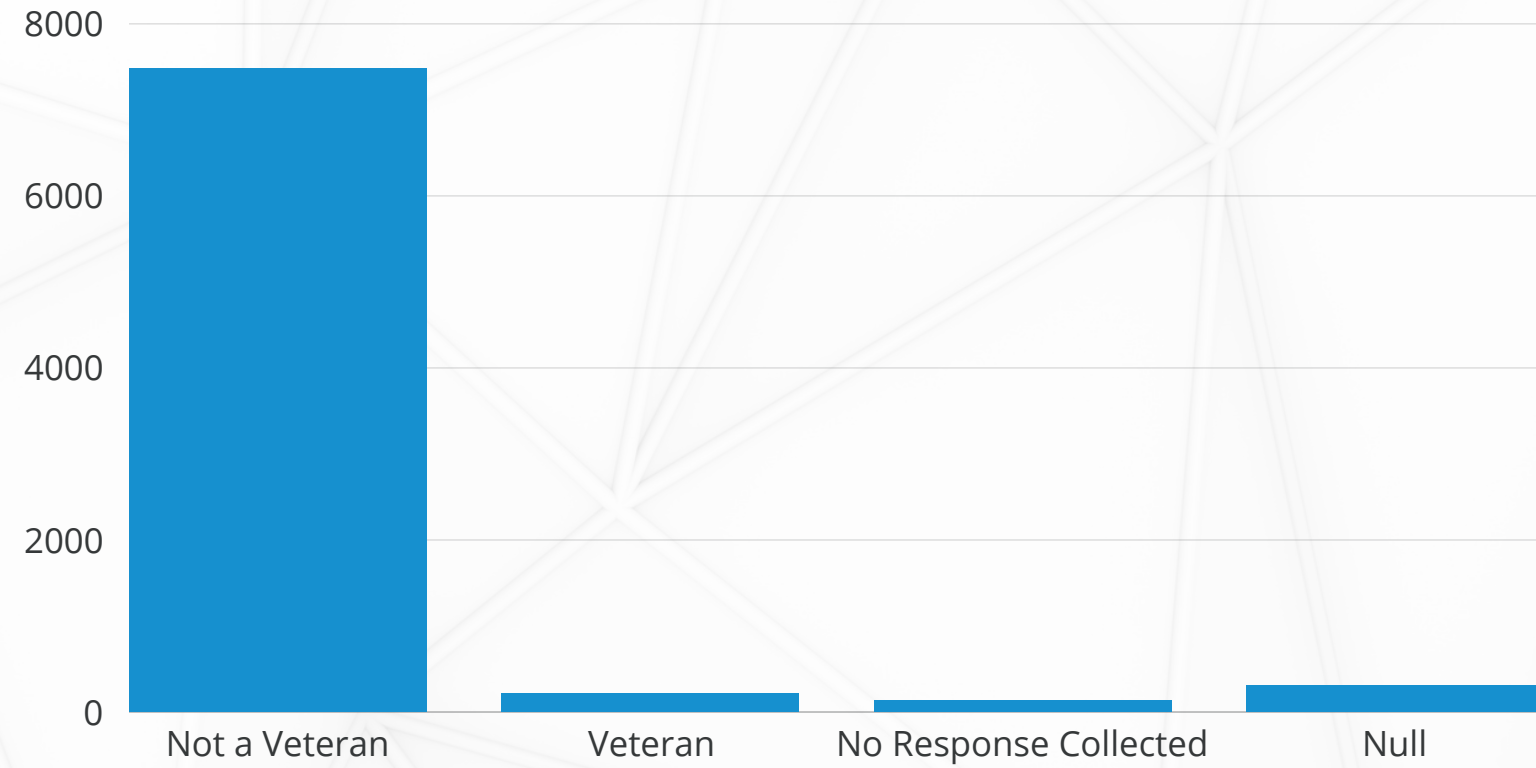
Ethnicity



Gender Identity

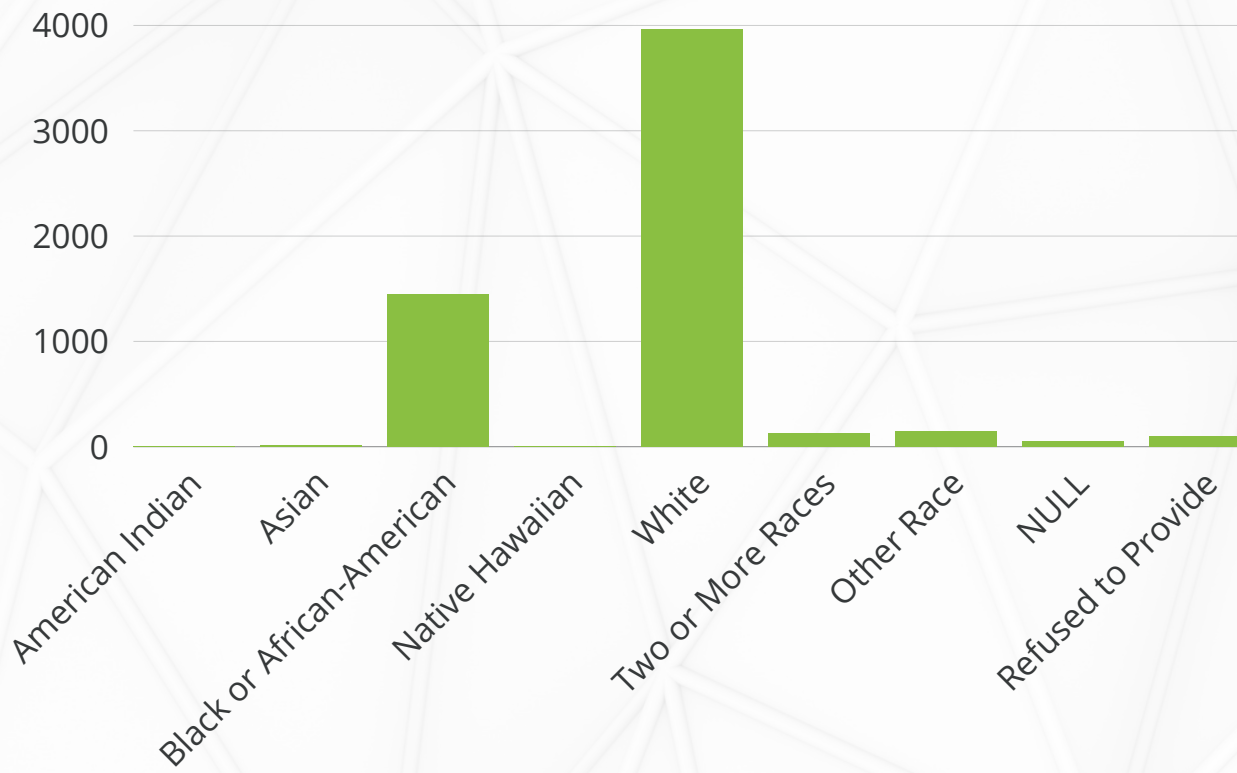


Veteran Status

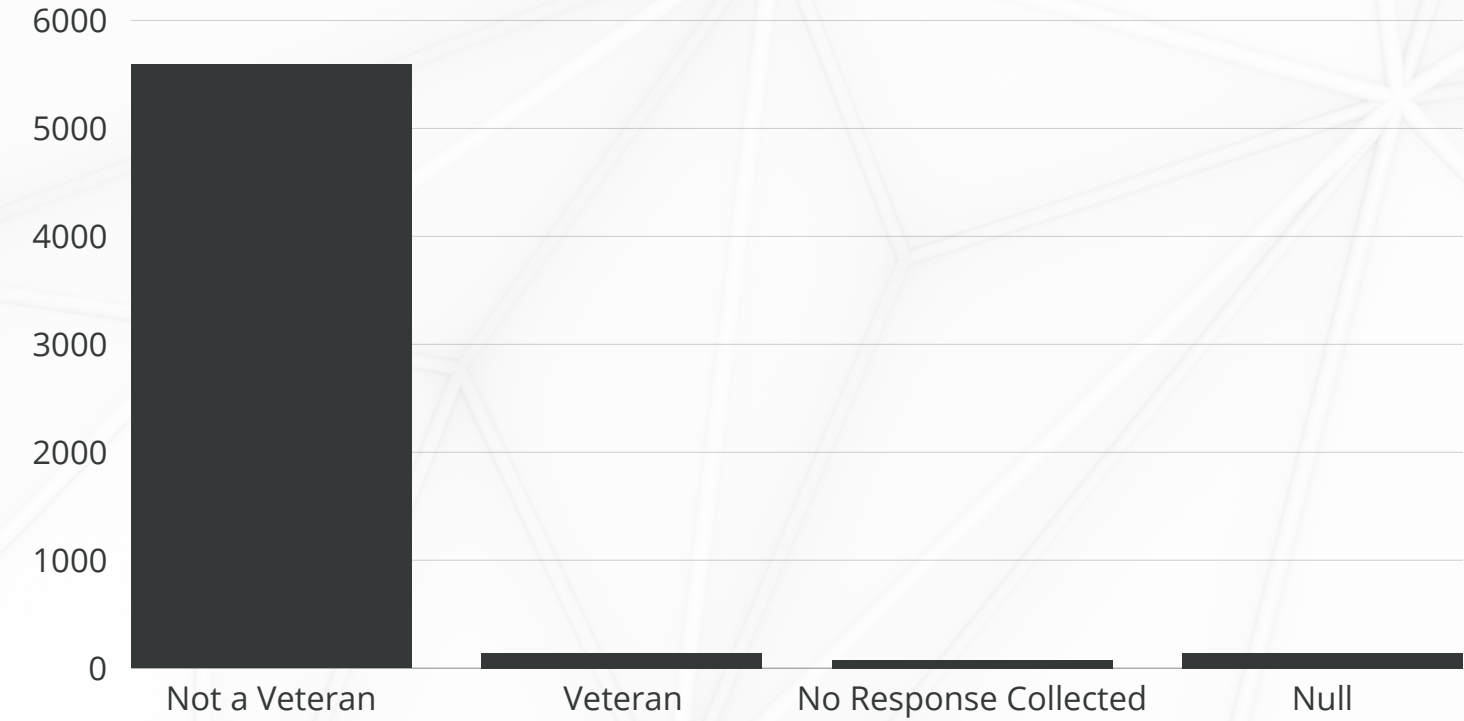


TOTAL SERVED: 5,921 CCBHC

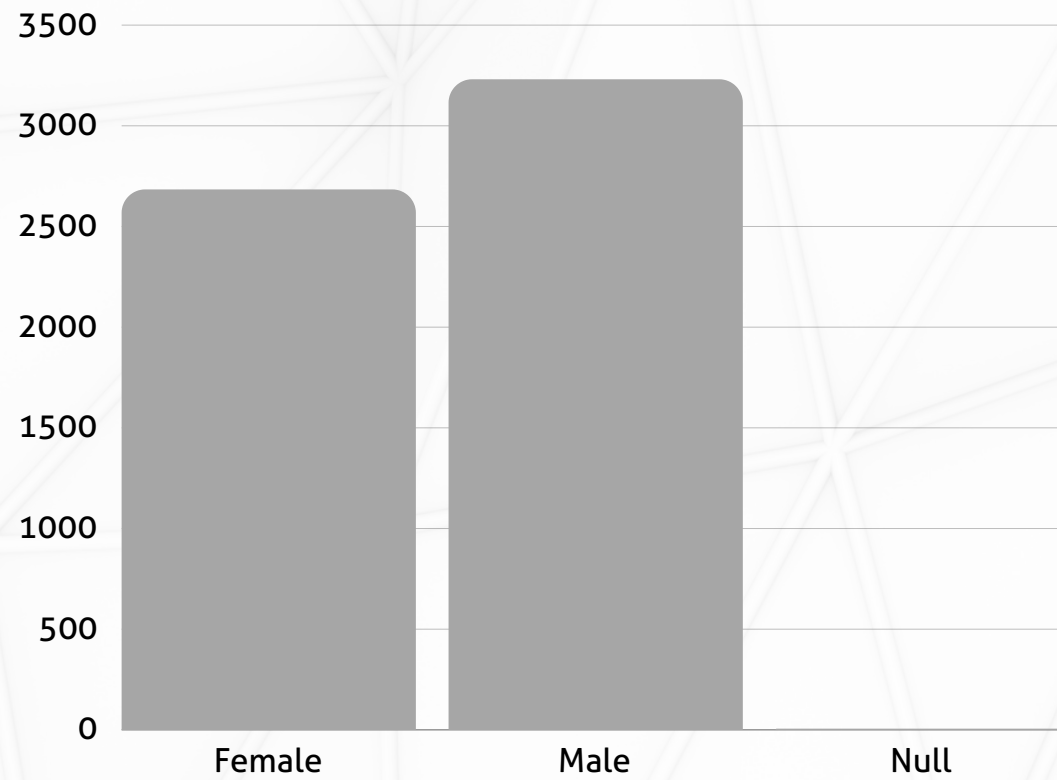
Race



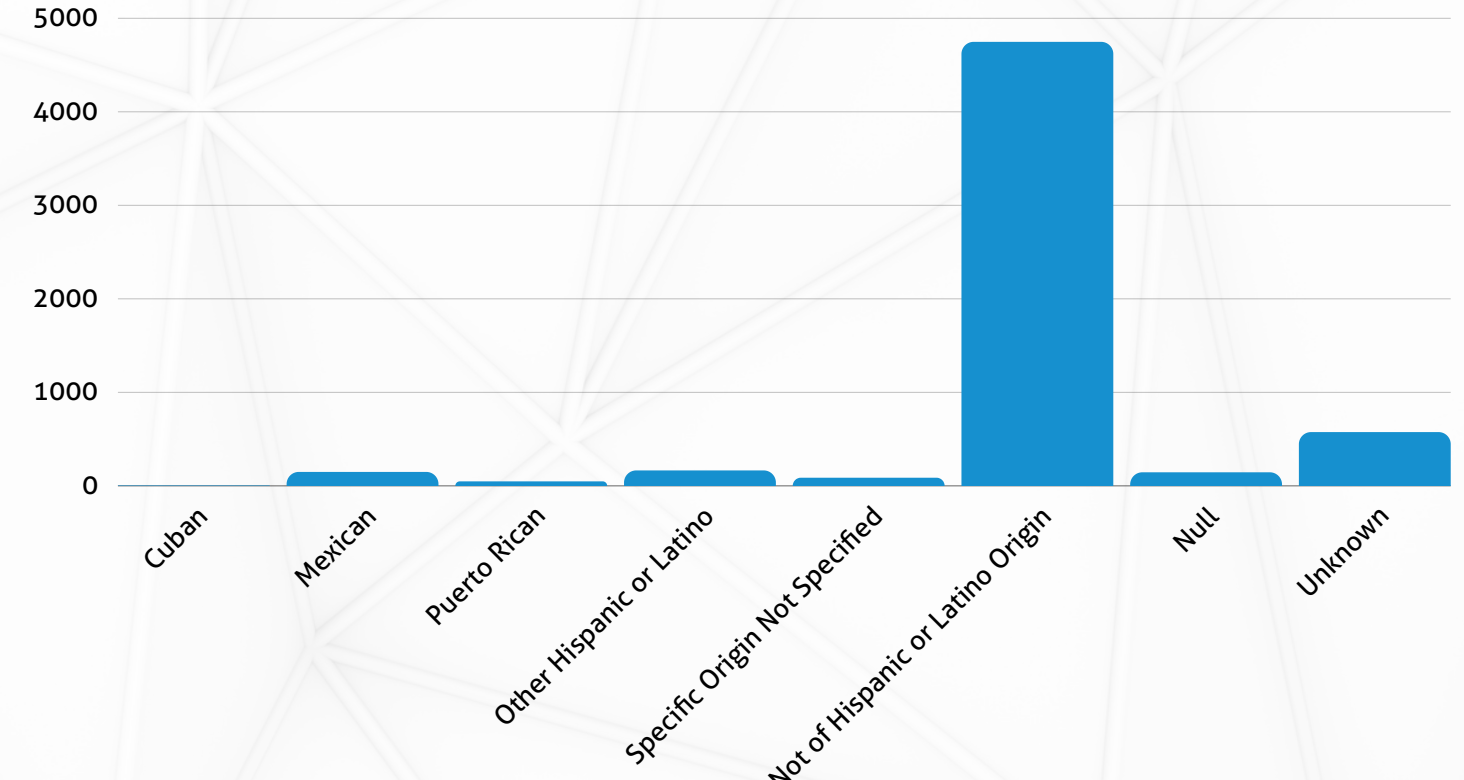
Veteran Status



Gender At Birth



Ethnicity



FY 23 LOCATIONS

Club Interactions

1470 Peck St
Muskegon, MI, 49442

Muskegon Covenant Academy

154 McLaughlin
Muskegon, MI, 49442

Folkert Community HUB

640 W Seminole Rd
Norton Shores, MI, 49441

State Probation 3rd Floor

131 E Apple Ave
Muskegon, MI, 49442

Integrated Health Clinic

376 E Apple Ave
Muskegon, MI, 49442

Terrace Plaza 1st Floor

316 Morris Ave Suite 170
Muskegon, MI, 49440

Johnny O. Harris

97 E Apple Ave
Muskegon, MI, 49442

Terrace Street Crisis Residential

1364 Terrace St
Muskegon, MI, 49442

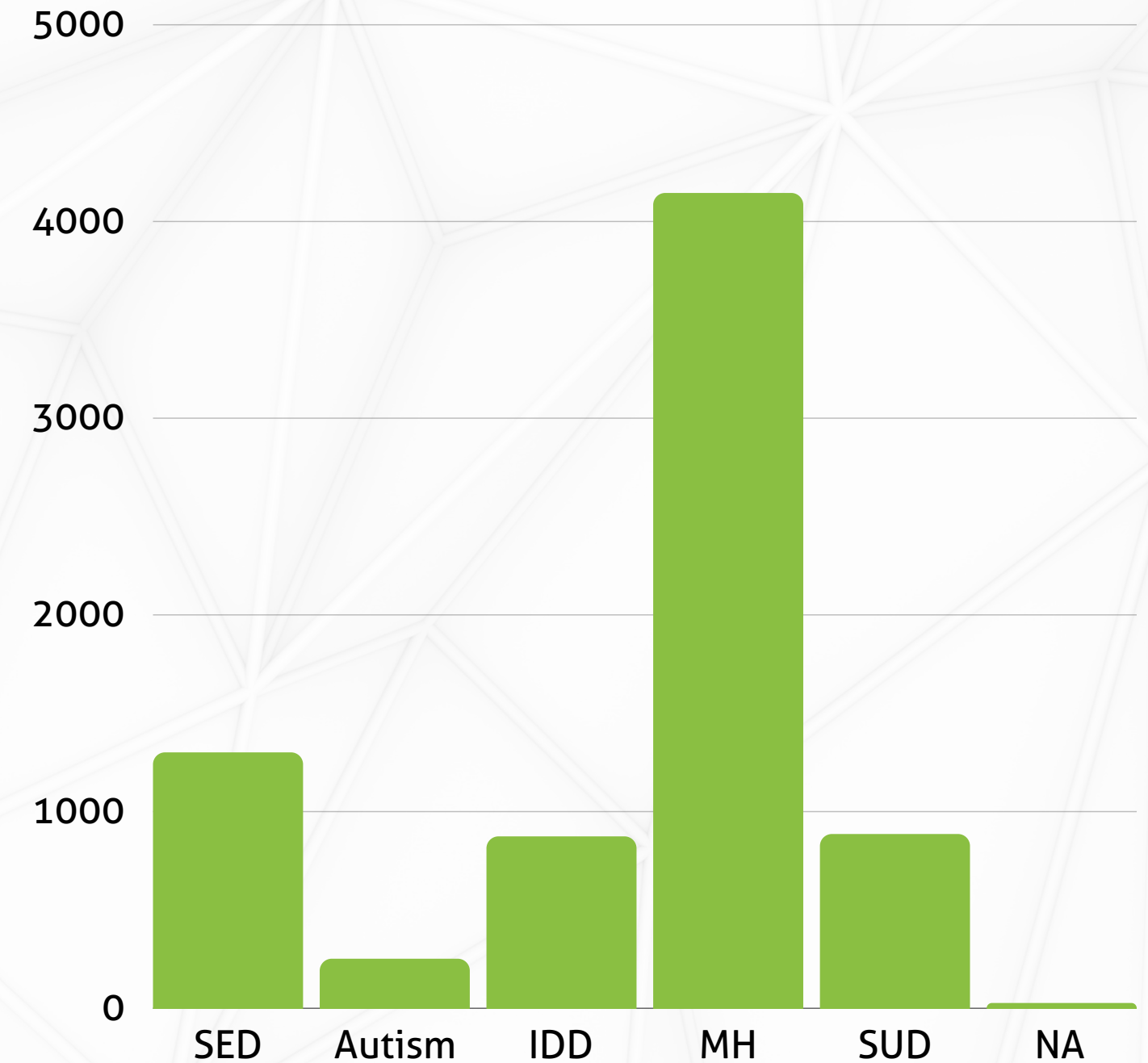
Mental Health Center

376 E Apple Ave
Muskegon, MI, 49442

Terrace Street Office Based

1352 Terrace St
Muskegon, MI, 49442

PROGRAM DESIGNATIONS OF FY 23



Individuals in MH/IDD that received a service in FY23 that included an SUD Dx:

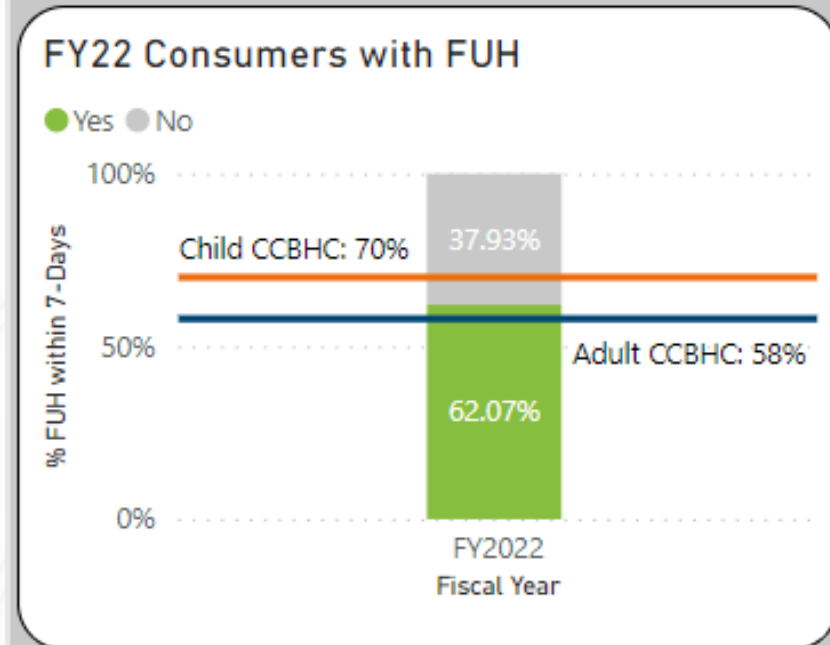
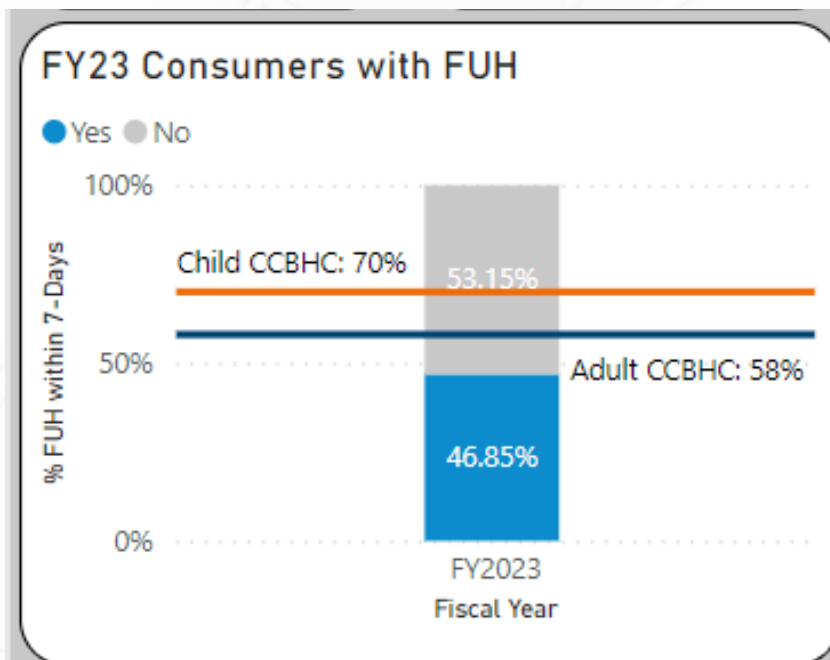
- MH 1714 of 4145 = 41.4%
- IDD 42 of 874 = 4.8%

FY 2023
Strategic Plan
GOAL 1

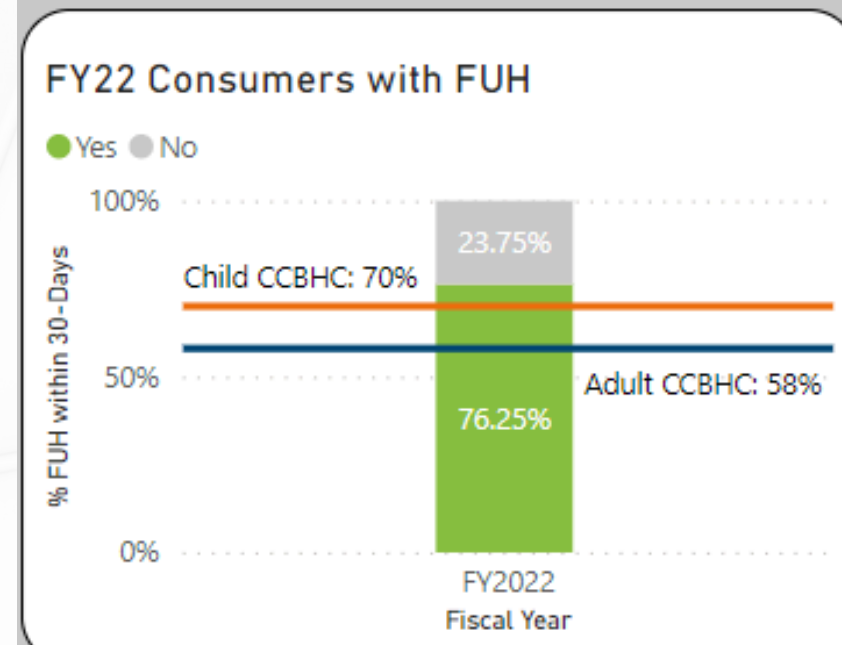
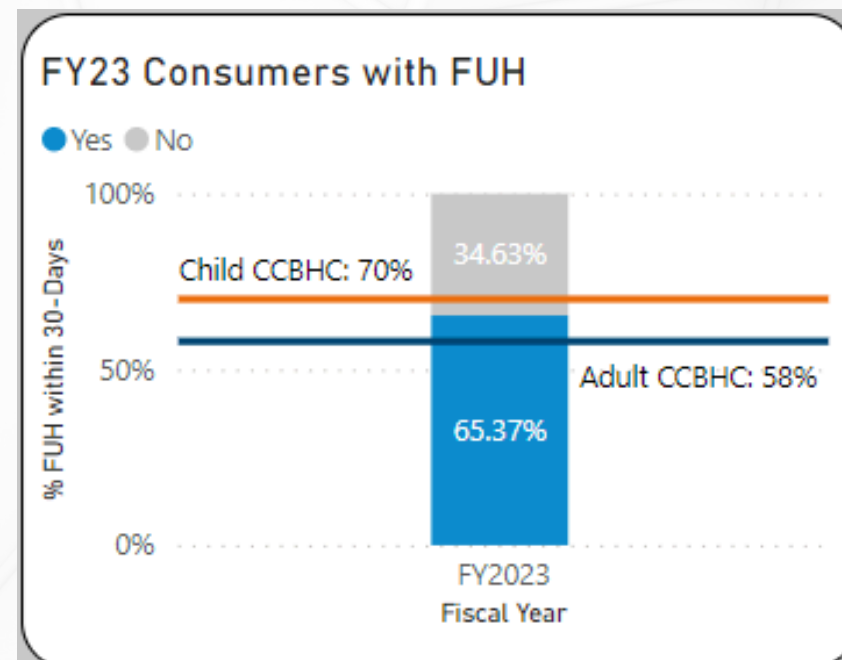
Implement a Comprehensive Approach to Increasing Inclusion, Diversity, and Equity at HealthWest.

The Data Analytics Team created a dashboard to show FUH (Follow-up to Hospitalization) rates for adults and children.

FUH W/IN 7-Days



FUH W/IN 30-Days



External Reporting and Internal Data Request Systems:

Agency-wide reporting system for external reports with auto-notification and project manager oversight, completed and in use.

Dashboards for three CCBHC QBP's completed. SAAAD, needs external data refresh schedule added. Work on the three other CCBHC QBP's in progress: for FUH-AD and FUH-CH. Data request submitted for IET-BH.

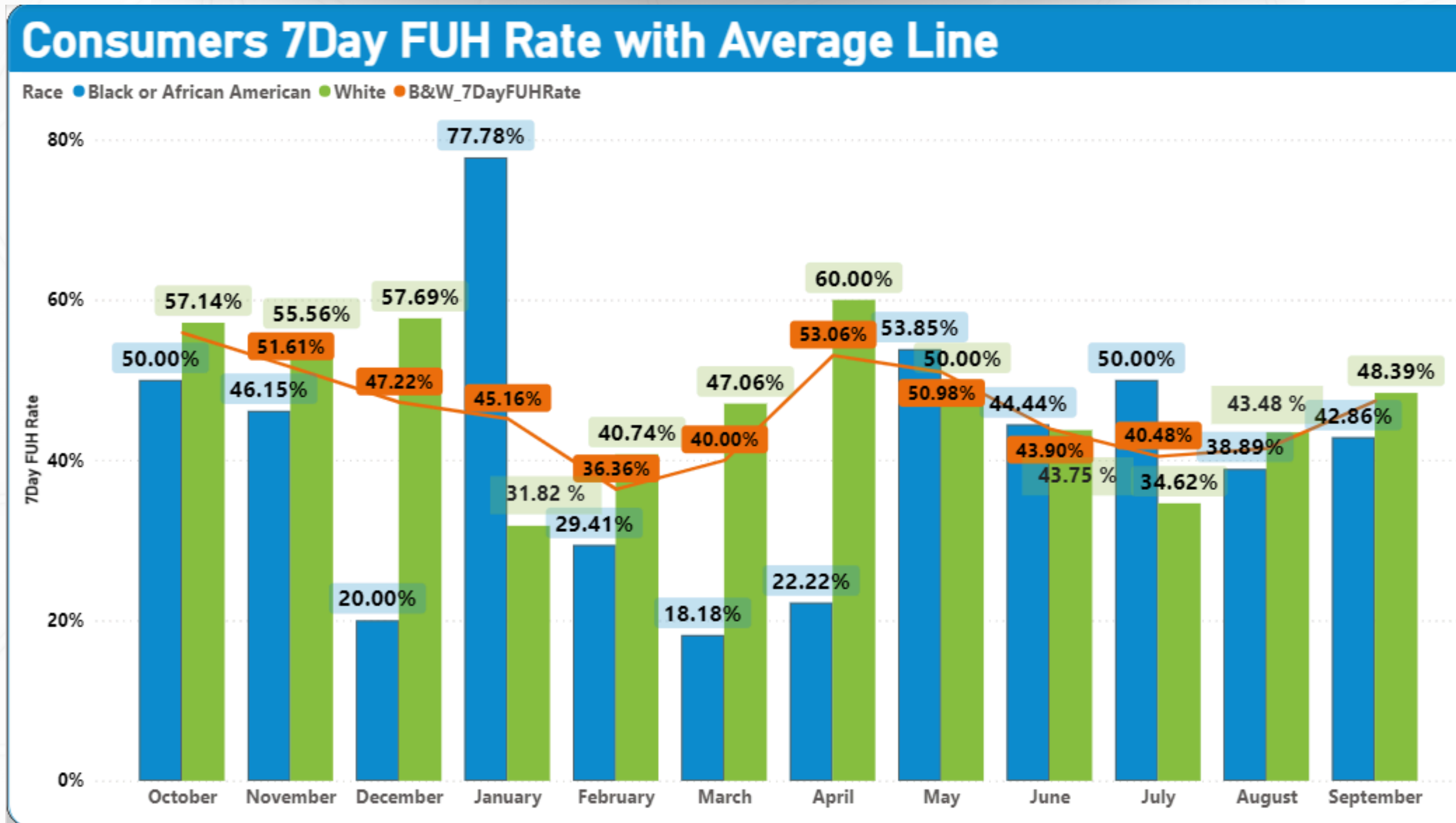
Presentation, Interpretation and Validation of Data:

- Style guide completed and documented
- Process in place for reviewing/teaching

Supporting Documents:

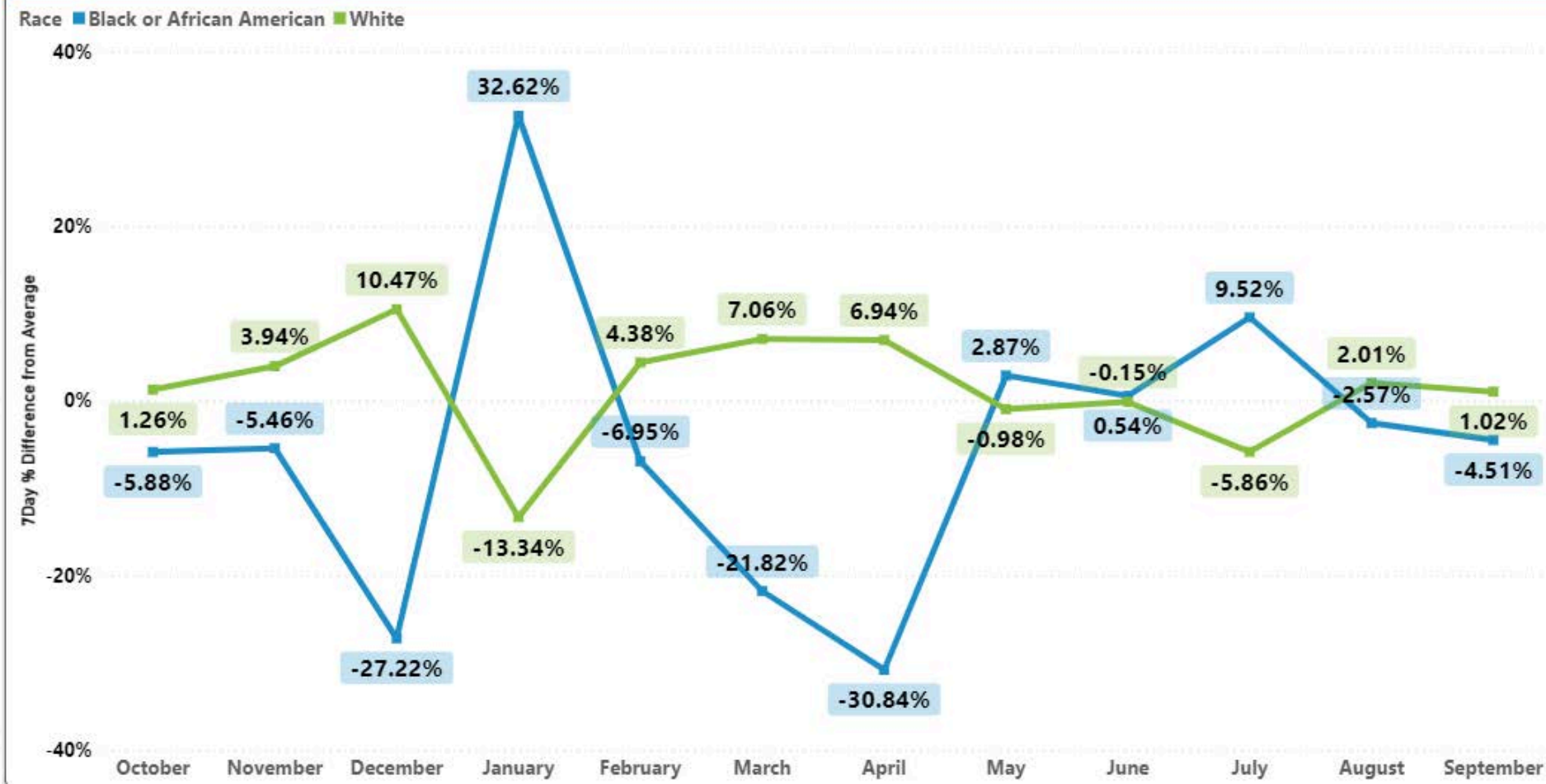
- Action Plan Data Technical Team.docx
- Data Request Process .pdf
- StyleGuide.docx

The Data Analytics Team created a dashboard to show FUH (Follow-up to Hospitalization) rates by race/ethnicity. This work is being expanded on by the Data Analytics Specialist who is now on the Quality Assurance team.

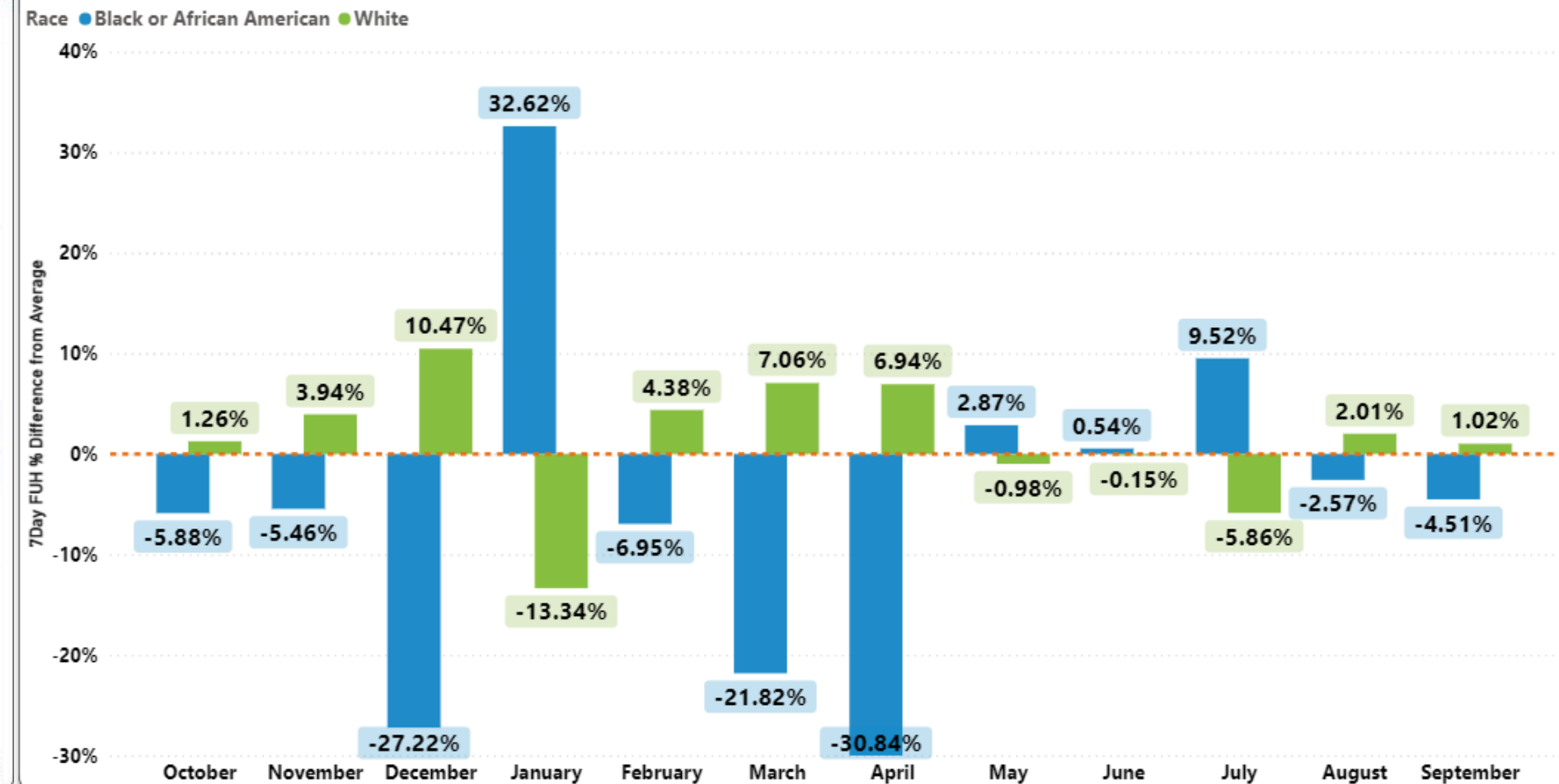


A recommendation was made to use a measure called "Percentage Point Gap" to best measure if a perceived disparity is statistically significant. An additional dashboard was created to measure and monitor the PPG to see if interventions are reducing disparity over time.

Consumer 7Day FUH % Difference from Average



Consumers 7Day FUH % Difference from the Average



The Quality Assurance team worked closely with SUD providers to improve discharge planning and care coordination, retrain staff on FUH requirements, and worked on making updates within the EHR in an effort to improve documentation.

SUD Provider Network - Muskegon County Options

Treatment Provider	Opioid Treatment Program: Methadone	Outpatient	Recovery Mgmt Team	Intensive Outpatient	Day Treatment	Medication Assisted Treatment	Womens Specialty Services	Recovery Housing	Population
ACAC		1			2.5				
Arbor Circle		1	Rec Mgmt				WSS		
Building Men for Life								RH Level 3	male
Catholic Charities West Michigan		1		2.1					
Cherry Street -Muskegon Recovery Center	OTP								
Eastside Outpatient Services	OTP					MAT			
Every Womans Place - Sober Living								RH Level 3	female
Family Outreach Center		1	Rec Mgmt						
Fresh Coast Alliance								RH Level 2	female, male, and family
Reach for Recovery - Grand Haven		1		2.1		MAT			
Recovery Road - Muskegon								RH Level 2	female and male
The Comfort Home								RH Level 2	female and male
Wedgwood Christian Services		1 Adult and Adolescent	Rec Mgmt				CM, FET, SPA		

SUD Provider Network - Out of County Options

Provider	Location	Residential				Withdrawal Management/ Detoxification			
		3.1	3.3	3.5	3.7	Level 1 WM	Level 2 WM	Level 3.2 WM	Level 3.7 WM
Addiction Treatment Services-Dakoske	116 E Eighth St, Traverse City, MI 49684-2524			3.5					
Addiction Treatment Services- The PIER Detox	940 E Eighth St, Traverse City, MI 49686-2893				3.7			WD 3.2	WD 3.7
Addiction Treatment Services-Phoenix	445 E State St, Traverse City, MI 49686-2603			3.5					
Community Healing Centers - Gilmore	1910 Shaffer St. Kalamazoo, MI 49048	3.1	3.3	3.5	3.7				WD 3.7
Harbor Hall	704 Emmet St, Petoskey, MI 49770-0000	3.1		3.5				WD 3.2	
Our Hope Association	3508 Shaffer Ave, Kentwood, MI 49512			3.5					
Our Hope Association	324 Lyon Street NE, Grand Rapids, MI 49503			3.5					
Reach for Recovery-Chester Ray	231 Washington Blvd, Holland, MI 49423	3.1		3.5					
Reach for Recovery - Harbor House	377 Lincoln Ave, Holland, MI 49423	3.1		3.5					
Sacred Heart - Clearview Womens Specialty	400 Stoddard Road, Richmond, MI 48062			3.5					WD 3.7
Sacred Heart - Adult Residential	400 Stoddard Road, Richmond, MI 48062			3.5					WD 3.7
Sacred Heart - Serenity Hills Recovery and Wellness	6418 Deans Hill Road, Berrien Center, MI 49102			3.5					WD 3.7
Salvation Army Harbor Light - Grand Rapids	1215 E. Fulton Street, Grand Rapids, MI 49503			3.5 LT	3.7 ST				WD 3.7
Wedgwood Christian Services	3300 36th St SE, Cascade, MI 49512			3.5					

A new Recovery Coach role has been introduced at the front desk to provide specialized support for Substance Use Disorder (SUD) placements. Additionally, The Finance team is collaborating with the Access/Stabilization Manager to explore the financial requirements for a similar position aimed at aiding individuals with Mental Illness/Developmental Disabilities (MI/DD) who are not currently affiliated with HealthWest in accessing Follow-Up after Hospitalization (FUH) services.



HR INITIATIVES

The HR team established a baseline measure 12% of supervisory staff are racially diverse. Our goal is to increase this by 10% in FY2024.

We started the Hire Reach hiring methodology and have implemented fully in one department (Finance) and for several specific positions (Autism BAT's, MLC's, Case Manager's and DSP's). This is slowly rolling out for all positions.

We are working on a process to capture the number of applicants who apply after meeting Laurie Johnson at an outreach event.

Staff Involvement

- Weekly Newsletter
- Committees
- Workgroups
- PFA

Staff Support Workgroup

- Holiday Market
- Thankful Tuesday
- Spirit Week
- Workiversary Cards
- Pick a Pop Event
- The Westies
- United Way Fund Drive

Staff Incentives:

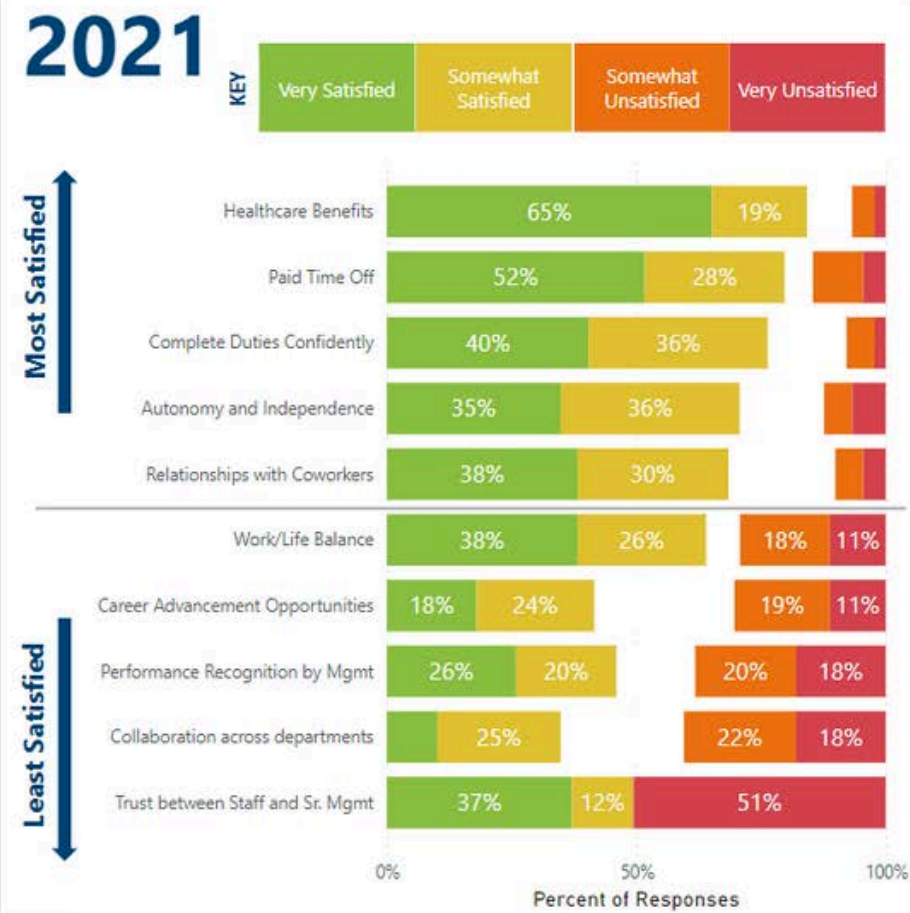
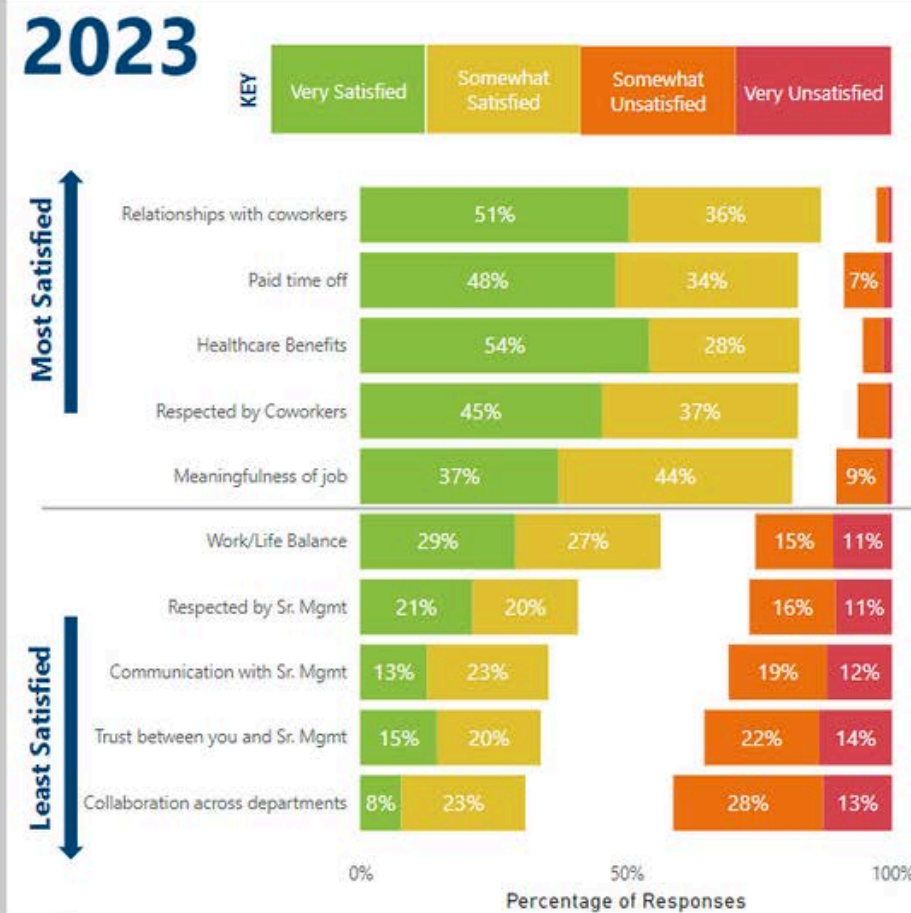
- \$1,000 retention stipend to all staff after 6-months of employment
- Committee Chair and Co-Chair Incentives
- On-Call Incentive Stipends
 - \$300 paid out quarterly
- Education Assistance and Tuition Reimbursement
- \$300 Personal Development Dollars
- Credential Stipends
- Employee Referral Bonus
- Youth Services and Corrections Services Masters Level Clinician Incentives
- ACT Retention Stipends
- CALM App
- PSLF
- ID.ME

**Staff turnover
dropped
from 28% to 20%!**

STAFF SURVEY | MAY 15-31, 2023

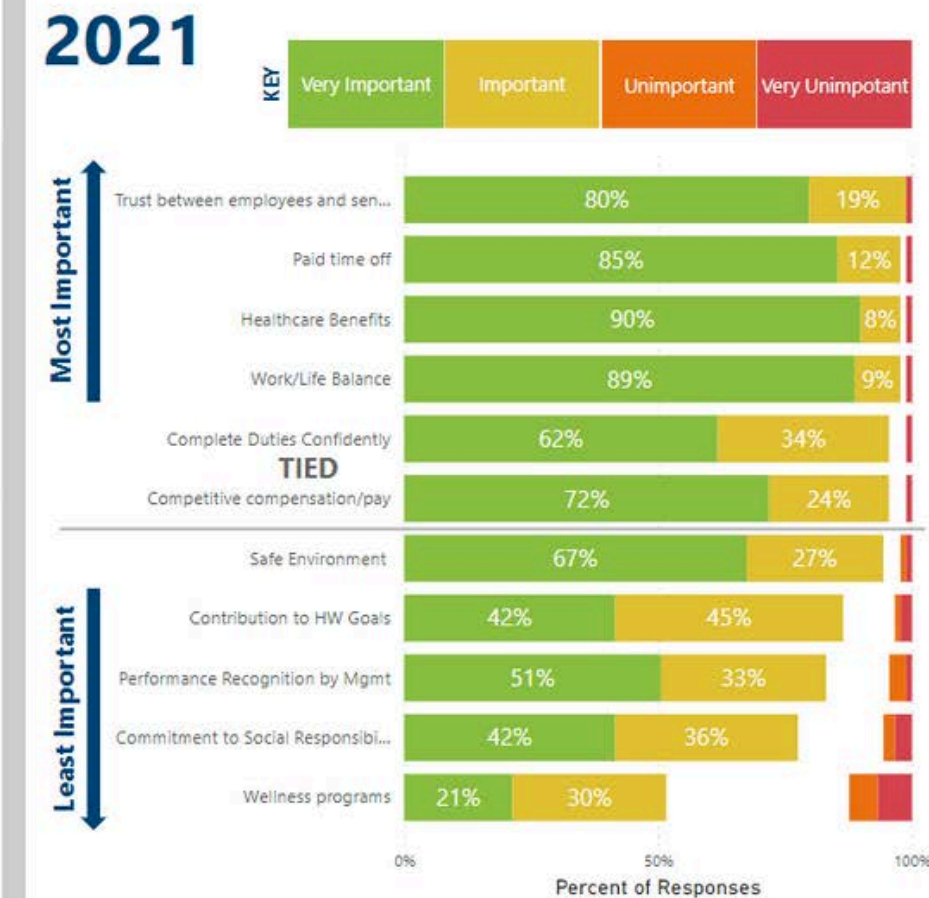
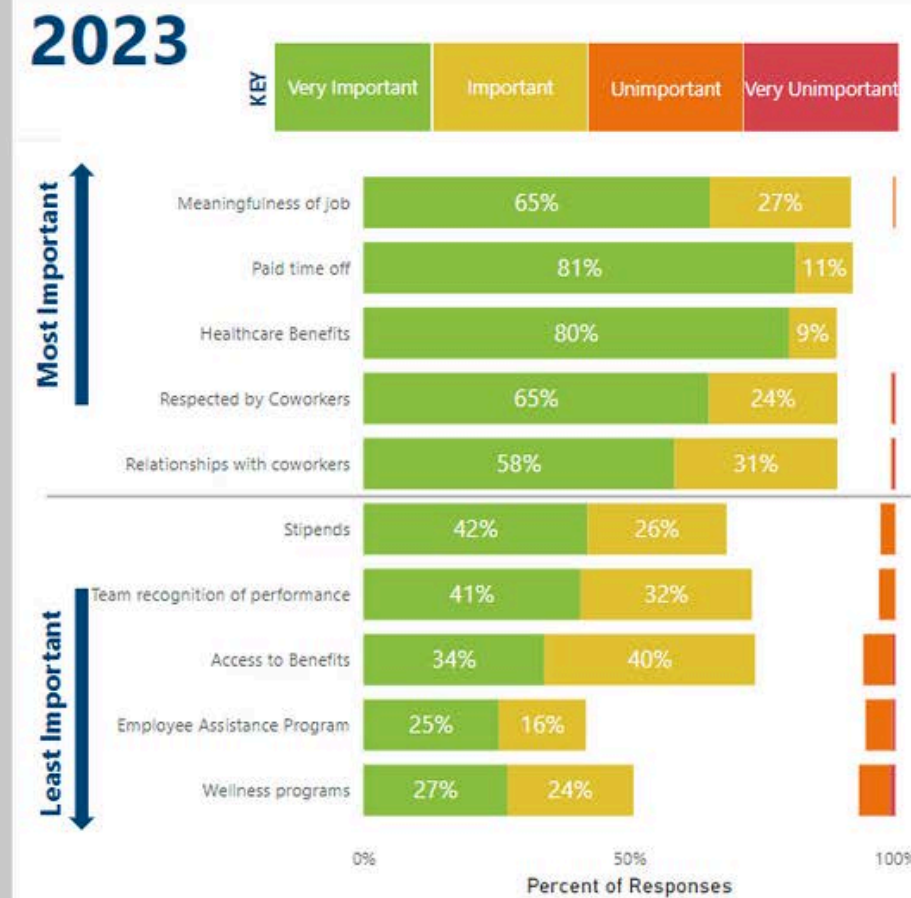
Satisfaction Top and Bottom Five: 2023 vs 2021

Data Source: LaserFiche



Importance Top and Bottom Five: 2023 vs 2021

Data Source: LaserFiche



What immediate change at HealthWest would make your job less stressful?

- Improved Communication: 31 votes
- Work From Home: 24 votes
- Manageable Workload/Caseloads: 20 votes
- Additional Staff: 16 votes
- Leadership Changes: 10 votes

What changes at HealthWest have made the biggest impact for you this past year?

- Losing Work from Home: 23 votes
- Leadership Changes: 16 votes
- Stipends: 11 votes
- Staff Turnover: 9 votes
- Scheduling Changes: 9 votes

CULTURAL INTELLIGENCE FRAMEWORK

By increasing the Cultural Intelligence of HealthWest staff, the staff is able to relate and work effectively in multicultural situations. Working towards improving staff CQ, and structuring the supervisory process for all staff are both means to outcomes of higher quality services and improving the customer experience by first developing our staff with fidelity.

512

How Many Staff Trained

79

CQ Drive

49

CQ Knowledge

70

CQ Strategy

60

CQ Action

FY 2023
Strategic Plan
GOAL 2

**Position HealthWest for
Excellence by Maintaining
Status as a Certified Community
Behavioral Health Clinic.**

HEALTHWEST IS A CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINIC BY OFFERING THE FOLLOWING SERVICES:

Point 1

Mental health crisis services, including 24/7 mobile crisis teams, emergency crisis intervention, and crisis stabilization.

Point 2

Screening, assessment, and diagnosis, incorporating risk assessment.

Point 3

Person-centered treatment planning, integrating risk assessment and crisis planning.

Point 4

Outpatient mental health and substance use services.

Point 5

Primary care screening and monitoring of vital health indicators and health risks in outpatient clinics.

HEALTHWEST IS A CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINIC BY OFFERING THE FOLLOWING SERVICES:

Point 6

Focused case management.

Point 7

Psychiatric rehabilitation services.

Point 8

Peer support, counseling, and family supports

Point 9

Intensive, community-based mental health care tailored for members of the armed forces and veterans, with a specific focus on those in rural areas.

CCBHC POINTS 1 & 2

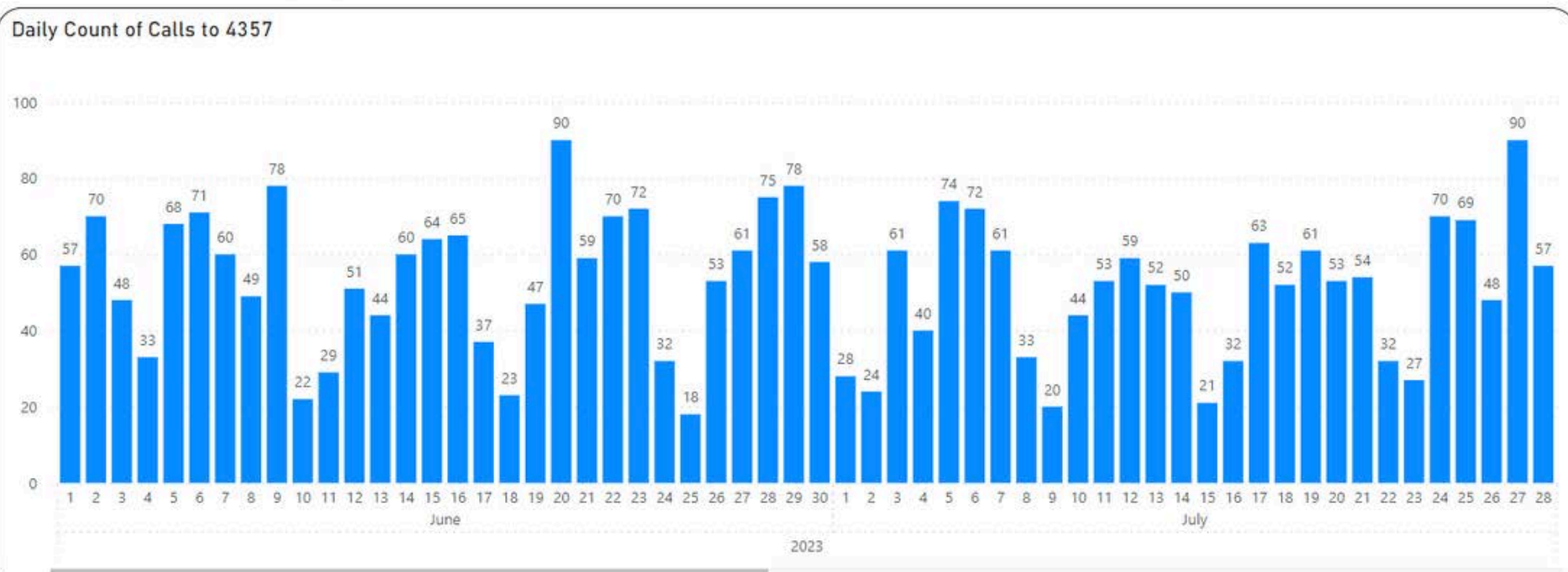
1. Mental health crisis services, including 24/7 mobile crisis teams, emergency crisis intervention, and crisis stabilization.
2. Screening, assessment, and diagnosis, incorporating risk assessment.

Point 1

Point 2

Warmline Calls

Date Last Refreshed 3/5/2024 3:19:15 PM



CCBHC I-EVAL: Timely Initial Assessment

Data Source: Latitude 43
Last Refresh Date: 03/19/2024

This metric tracks new consumers with initial evaluation provided within 10 business days of first contact. Consumers that meet this metric are highlighted in green. Those that do not are in red.

10/1/2022 to 9/30/2023

Medicaid: All (N, Y) | Medicare: All (N, Y) | AgeGroup: Adult, Child | StaffName: All | PrimaryProgramName: All

313 New Contacts

108 Number of New Contacts Who Received Timely Assessments

34.5% Percentage of New Contacts Who Received Timely Assessments

Performance Over Time: Compliance Percentage (FY23 Q1 to FY23 Q4)

44.73% New Contacts Awaiting BPS

First Contact Date	BPS Date	Business Days to BPS	Staff Name	Primary Program Name	Fiscal Year and Quarter
10/3/2022					FY23 Q1
10/4/2022	10/12/2022	6	Hruskach, Kelley	MI Adult Community Based	FY23 Q1
10/4/2022	4/14/2023	133	Pimpleton, Kaylyn	MI Adult Community Based	FY23 Q1
10/4/2022			Boxer, Michael	HealthWest Integrated SUD Team	FY23 Q1
10/5/2022	10/18/2022	9	Brown, Sarah	HealthWest Outpatient Clinic	FY23 Q1
10/6/2022			Lipski, Katherine	MI Adult Community Based	FY23 Q1
10/6/2022			Johnson Terrv	Recovery Coach Services	FY23 Q1

CCBHC POINTS 3, 4 & 9

- 3. Person-centered treatment planning, integrating risk assessment and crisis planning.
- 4. Outpatient mental health and substance use services.
- 9. Intensive, community-based mental health care tailored for members of the armed forces and veterans, with a specific focus on those in rural areas.

Points 3 & 9

Care Coordination team has been implemented to assist with this goal. This team provides care coordination between external and internal providers, and natural support. Complex care coordination with various Health Plans occurs monthly to assure adequate and efficient integrated care is provided, documented and assuring follow-up to all referrals. Staff includes a housing specialist, veterans systems navigator, benefits assistance and other support staff.

Point 4

Motivational Interviewing: A plan is in place for moving forward. Cohort 7 has completed training this past Fall.

Zero Suicide Team: HW has completed the Zero Suicide workforce study and have met with all staff who meet with individuals in services in Counseling and Access to Lethal Means.

Designated Collaborating Organization (DCO):

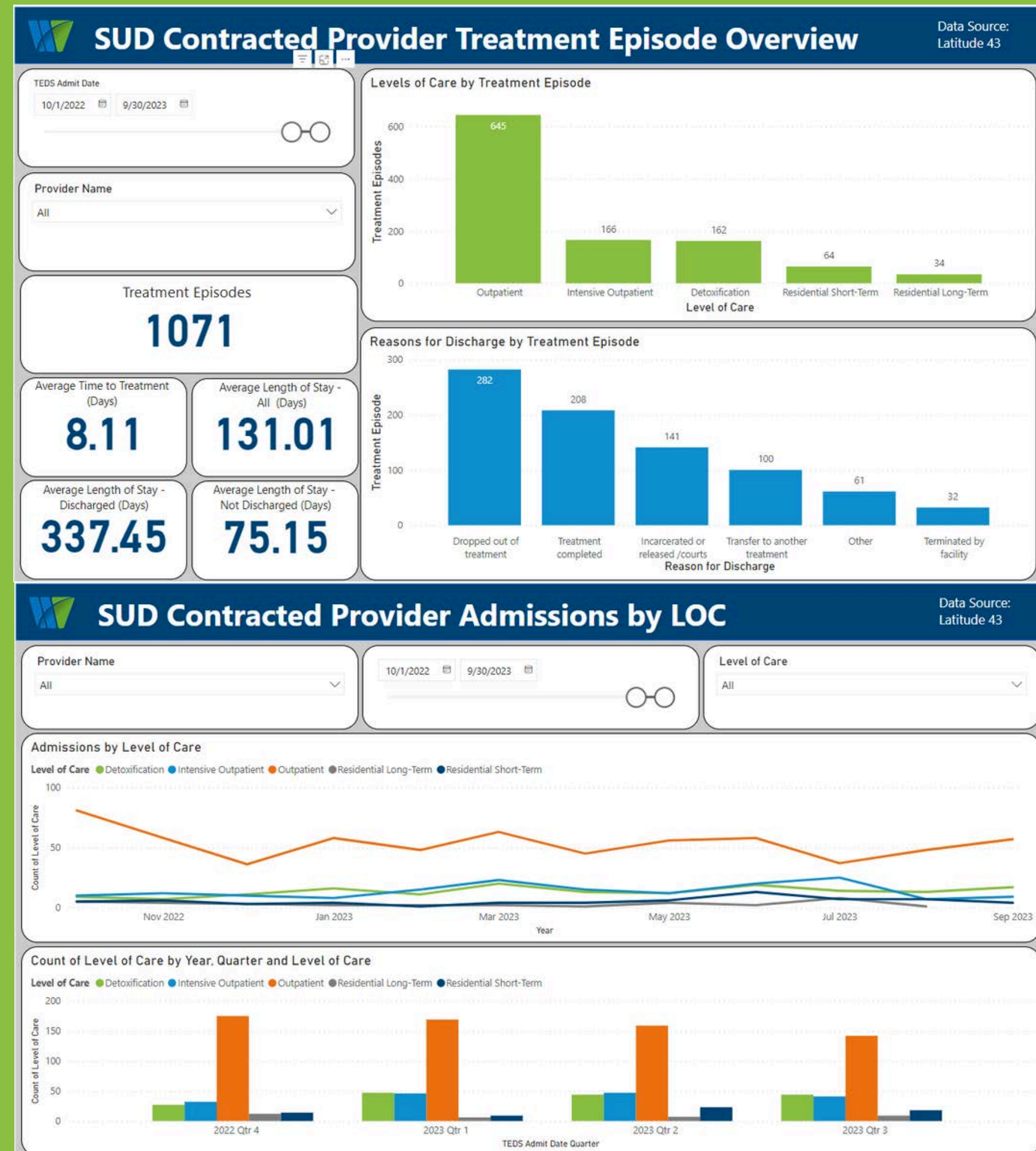
HealthWest currently has one DCO, Services of Hope, to expand our ability to provide Mild to Moderate Outpatient services to our individuals in service. With the addition of our DCO, we are able to serve an additional 200+ individuals annually. They are set to the same standards as any internal program and must comply with all CCBHC requirements. We have recently expanded their service array from therapy to decentralized access and psychological testing services. To ensure all requirements are met, they utilize our EHR to complete all documentation for individuals served for HealthWest.

Point 4 Continued

SUBSTANCE USE DISORDER INITIATIVES

Detox: Our prescribers are willing to provide coverage for 24 hour coverage. County was able to change liability coverage to enable this to go forward. There are only 6 beds available which hinders the space available for the amount of people needing this program. Staffing and space are the main needs to get this program running.

- HW Response to the Opioid Epidemic
 - Increasing access to Opioid Treatment Programs (new contract with Eastside Outpatient Services)
 - Recovery Coach Expansion to assist in warm handoffs and outreach
 - Narcan training and distribution with all HW staff
 - Opioid Summit held in August 2023
 - Participation with the Opioid Task Force
- Access to SUD Services Highlight network adequacy and continuum of service providers
- Efficiency to enter treatment Highlight timeliness to treatment – capturing motivation quickly when services are requested.
- Focus on timeliness to treatment to ensure we are capturing motivation quickly when services are requested.



Point 5

INTEGRATED HEALTH CLINIC VISITS

5. Primary care screening and monitoring of vital health indicators and health risks in outpatient clinics.

Total Dental Visits

2743

+94%
from
FY '22

Total Medical Visits

1116

-25%
from
FY '22

Total Behavioral Health Visits

309

-49%
from
FY '22

Total MAT Visits

114

-11%
from
FY '22

Total Dental Patients

824

+94%
from
FY '22

Total Medical Patients

1984

+53%
from
FY '22

Total Behavioral Health Patients

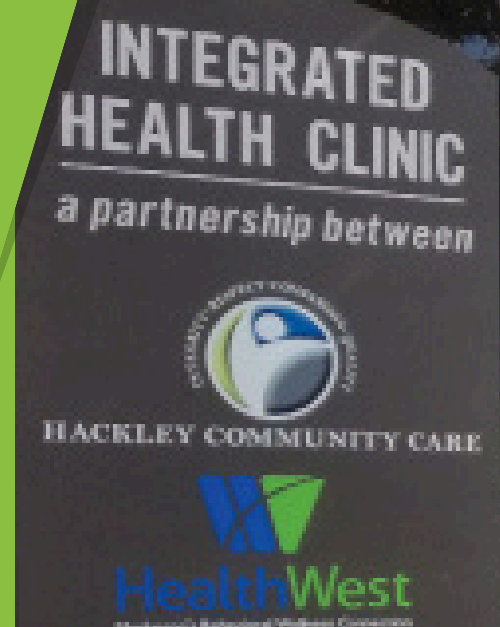
527

+25%
from
FY '22

Total MAT Patients

203

+63%
from
FY '22



CCBHC POINTS 6, 7

- 6. Focused case management
- 7. Psychiatric rehabilitation services

Point 6

CRU Units: HealthWest found space, staffing, and community collaboration not available to start this in the last 12 months. Livability Lab finalized their portion and turned in to the Executive Committee of the Diversion Council. Staffing and appropriate space are the biggest needs for the Living Room Model.

Independent Living / Residential and community support alternatives.

Point 7

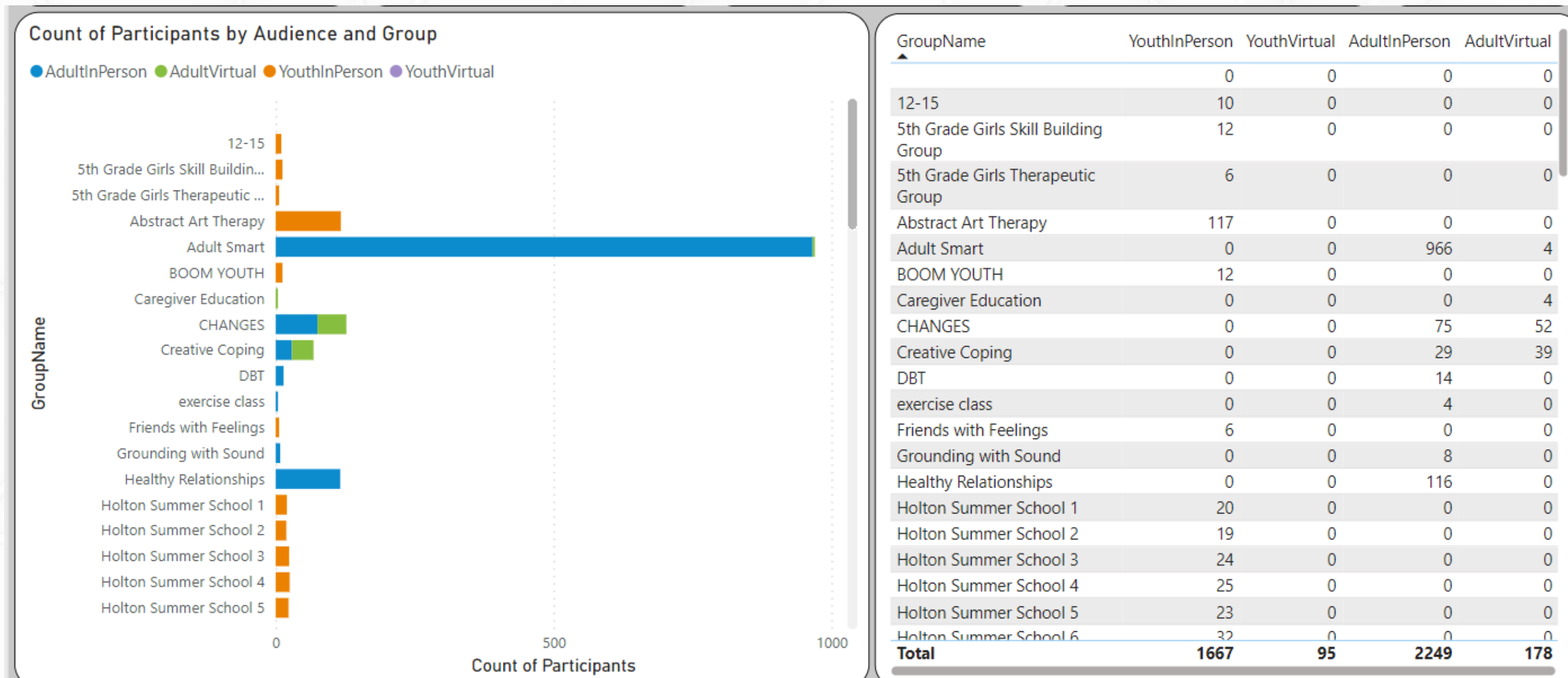
DBT: Staff are in cohort training. Obtaining Master Level Clinicians who are in cohort training through March, one in May. New staff is hired and in process of being trained.

CCBHC POINT 8

8. Peer support, counseling, and family supports

In addition to counseling services, we offer online and in-person opportunities every day to help connect, educate, and engage the community. Many of our group offerings are open to the general public with some lead by peers with lived experience.

Point 8



FY 2023
Strategic Plan
GOAL 3

Develop Sustainable and Responsive Systems for Ongoing Development, Learning and Growth.

STAFF INITIATIVES

The Development Planning Committee has been established but is currently on hold. We need to have a good system for performance appraisals first and then we'll work on how we add development planning to the process. The plan is to evaluate what we can do simultaneously.

The Supervisory Training Workgroup was established at the Muskegon County HR level. It was created as an effective HR orientation and training for supervisors. HealthWest's HR Manager is a member of this workgroup.

MYalliance has partnered with Pathfinders to evaluate trauma-informed needs through the parent village model. Social Emotional learning cohorts are held within school districts to inform and education on trauma, mental health signs and symptoms, and access to services.

GOALS

Increase number of persons trained on community based behavioral health topics by 10% each year.

- 40 community presentations/trainings were requested by various community groups
- Businesses with over 1,363 participants.

While we did not increase the number of trainings, we did increase the number of participants from 600 to 1363 which is an increase of 127%.

PROFESSIONAL DEVELOPMENT DOLLARS

All HealthWest staff have access to up to \$300 per year for professional development and growth, including conferences, training, seminars, and other similar opportunities.

License Renewal and Obtainment: 99 or 23%

- License Renewals
- Applications for new licenses
- Study materials for certification/license exams

Non-HealthWest Trainings and Courses That Mostly Include CEU Offerings: 92 or 21%

- Anti-Suicide Training
- Behavior Analysis Certification Board
- Courses on Substance Abuse

Professional and Personal Growth: 246 or 56%

- Motivational Interviewing
- Conferences
- Books/Webinars

MichiCANS

The Decision Support Model for the MichiCANS screener took place in FY 2023, while the Decision Support Model for the MichiCANS Comprehensive took place in FY 24.

The Soft Launch started in FY 24, to include TCOM, Screening, and Assessment Training and use of the tools, but a lot of preparation took place in FY 23.

437 total professional development applications were approved for FY23.

CONSUMER ADVISORY COMMITTEE

- October 2022 – First official Consumer Advisory Committee.
- December 2022 – Connected two Consumer Advisory Committee members to the LRE Advisory Committee.
- February 2023 – HealthWest Board officially appoints 11 members to the Consumer Advisory Committee.
- March 2023 – Three members attended the Voices in Action, Individuals with Developmental and Intellectual Disabilities Advocacy Event.
- April 2023 – The elected chair, co-chair, and secretary started their positions. One member attended the Suicide Advocacy event in Lansing.
- May 2023 - Two committee members attended the Self Determination Conference.
- June 2023 – Introduction of New Executive Director (Rich Francisco)
- August 2023 – A member was invited to the CIT program to share lived experience.



Founding Members

Members include Demario Phillips, Cherry Fouty, David Scholtens, Eric Johnson, Tamara Madison (chair), Emily Ratlidge (secretary), Angie Kartes (co-chair), Cindy Devries, and Thomas Hardy.

COMMUNITY CONNECTION

If you combine the efforts of both outreach and presentation/training, we attended 208 events while reaching 19,129 attendees/participants. The numbers are a combination of outreach booths, community requested presentations and trainings, and trainings we offered as part of our training calendar.

Enhance and Strengthen Community-Based Partnerships

- A lot of community partners supported the Health Wellness & Recovery Picnic (HWR). We also supported partners by attending their outreach events and provided trainings to their staff and consumers.
- Health, Wellness, and Recovery Picnic sponsors: We increased exhibitors from 90 to 96, a 6.7% increase. We also increased sponsorships from \$15,750 to \$21,350, an increase \$6,600 dollars or 35.5% increase
- Health, Wellness, and Recovery Picnic attendees increased from 1,000 to 1,200 despite the rain, a 20% increase
- We partnered with Wesco last summer to help with PFA/crisis intervention and came up with a training plan



COMMUNITY CONNECTION

Increase Outreach and Engagement of Priority Populations

- 119 training and presentations conducted and 3,183 attendees, this includes middle/high youth and adults. This is an increase of 6.3% over last year's 3,000.
- The training calendar had over 79 training offerings open to the community.
- We participated in 88 outreach events which is an increase of 95% from last year's 45 events. We reached over 15,946 attendees, a 195.5% increase above last year 5,400.
- Nine PSAs targeting the African American community with an estimated reach of 21,600 listeners.
- Sponsored the Latino Festival
- We had a booth at the Pride Festival and we collaborated for a presentation and panel during June.
- We also targeted the northern part of the county, attending several outreach events and conducted a presentation on mental health and HealthWest services at the Praise Center in Whitehall.

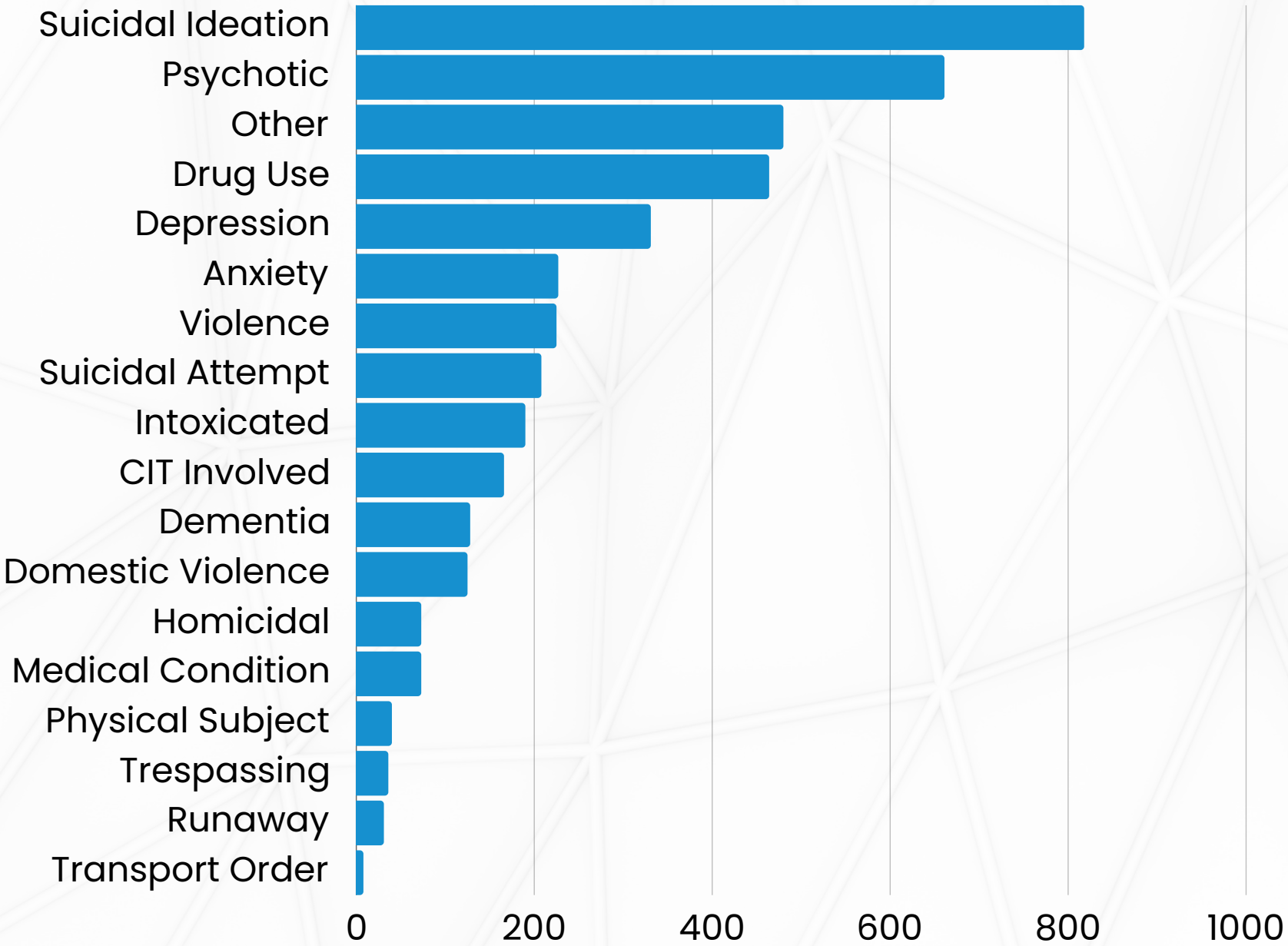


COMMUNITY CONNECTION

Crisis Intervention Team Programming Collaborative Efforts FY23

Between October 1, 2022, and September 30, 2023, HealthWest received 2,783 referrals from 11 police agencies, the Safe Seniors Task Force, and Probation. These referrals highlighted individuals facing a behavioral health crisis and possibly endured prolonged untreated behavioral health issues. This team and collaborating agencies promptly connected them to the necessary care and support.

Reason for Contact



FY23 Accomplishments & Highlights:

- CIT Training / 40 Hour specialty training to recognize and effectively intervene for someone experiencing a Behavioral Health Crisis.
- 2023 resulted in 37 cross system professionals being trained
 - 30 Law enforcement
 - 7 others including APS, Probation, Trinity Security and Behavioral Health Professionals
- Building the Behavioral Health Alternative Response
- LEAD expansion effective co-responding teams (LE and BH)
- Jail Based treatment expansion providing a integrated care approach.



YOUTH SERVICES

The School Based Services Sustainability Initiative focused on establishing quality, accountability, and financial stability for the school-based program. Initially reliant on the MyAlliance System of Care Grant since 2016, efforts to achieve sustainability independent of the grant began in early 2023. This involved refining program descriptions, enhancing clinical documentation standards, and collaborating with school administrative leadership. As a result, the programs are now fully sustainable without depending on the grant, which concludes in September 2024. Ongoing negotiations with various SOC schools aim to create tailored sustainability plans that address their specific needs.

Youth Leadership has been intentional to ensure we have at least one intern on every team in the department, recognizing that this is our best avenue for recruitment and supporting the overburdened workloads of our staff. While this is an investment of time and energy, it has paid off for HealthWest. Out of 14 Youth Department interns, we are currently on track to hire and/or promote nine of them. 12 out of the 14 interns were master level and they represent seven of the nine who will be hired or internally promoted within the organization.

Evidence Based Practice Training and Support

The Youth department continues to support staff in the attainment of clinical skills, including training in evidence-based practice models:

- Parenting Through Change
- Motivational Interviewing
- Families Moving Forward
- Trauma-Focused Cognitive Behavior Therapy
- Infant Mental Health
- SafERteens

FY 2023
Strategic Plan
GOAL 4

**Demonstrate High Integrity in
All Business Operations.**

CORPORATE COMPLIANCE

The Corporate Compliance Officer investigates any suspected fraud, waste, or abuse of services internally or externally and ensures that the agency remains compliant with all rules and regulations.

In FY 23, there were 17 Corporate Compliance Case investigations.

- Six were unsubstantiated
- One was referred to Recipient Rights
- Eight were resolved internally
- Two were substantiated and referred to the LRE/OIG for further investigation

Staff are required to complete Compliance Training annually and this is monitored to ensure all staff adhere to this requirement. CC Officer is a member of the Compliance Roat through the LRE and chairs the internal Corporate Compliance monthly meeting.

CORPORATE COMPLIANCE

The Corporate Compliance Committee has been restructured to ensure regular review of compliance and risk management areas or concerns, make recommendations, and ensure follow-up actions.

Credentialing and Privileging were moved to be a function of the HR team. The Quality Assurance team still works very closely with those responsible for credentialing to ensure all standards are met and necessary documentation is prepared for site reviews and audits.

In regard to Provider Relations, the Quality Assurance team works closely with contracts during LRE site reviews and works together to develop monthly provider audits.

The Grants Management position was hired under finance. The Quality Assurance team works with grants as needed for reporting, particularly with SUD Grants.

A Quality Assurance team member has been a part of the team working to implement TCOM. At this time, the internal team has paused with the introduction of the MichiCANS roll out.

In the area of Critical Incidents the Quality Assurance team has assisted in the introduction of the Lat43 module, trained all internal staff, presented to providers at provider meetings, worked with Recipients Rights and Human Resources to cover Risk Management and accident reports, created cheat sheets for staff use, worked with Data Analytics on a Power BI report to monitor trends in IRs, has started work with IT to develop an electronic form for providers to use, updated policies, and begun process mapping the RCA process when sentinel events occur. The team was also involved in implementing updated reporting requirements in miCAL CRM.

PROVIDER NETWORK

- 1.Stability Payments totaling \$297,501.88
- 2.Lakeshore Training System (LMS) completed training modules 17,131
- 3.Network Adequacy Plan completed
- 4.Two New Policies
 - 10-018 Provider Capacity and Services
 - 10-017 New Provider Orientation
- 5.Bimonthly meeting for all providers

SUD Providers

- 1.Monthly SUD Provider Network meetings
- 2.Bimonthly SUD provider meetings with in-county providers
- 3.Financial support for internal and contractual staff to attend the Annual Co-occurring Disorder Conference that was held in Sept 2023

Medicaid Provider Service Agreements

- Autism Service (5)
- Outpatient Services (39)
- Specialized Residential Services (32)
- Substance Use Disorder (SUD) Services (21)
- Community Inpatient Services (10)

Totaling 107

ADDITIONAL INITIATIVES

A Performance Improvement Committee workgroup is being created to further explore health disparities, the causes for them, and what interventions may be effective in reducing disparity.

The PIC has been restructured for monitoring of all QAPIP goals. Membership was expanded to include clinical and non-clinical members, as well as consumer membership.

Performance Improvement Committee Members

- Amie Bakos, Director of Adult Clinical Services
- Ann Gatt, Director of Children's Clinical Services
- Carrie Crummet, Clinical Services Manager - Utilization Management
- Cyndi Blair, Chief Clinical Officer - Clinical Operations Committee
- David Scholtens, Consumer Advisory Committee Representative
- Gary Ridley, Communications & Training Manager - Appeals/Grievances
- Jackie Farrar, Manager of Procurement & Provider Network
- Jennifer Stewart, SUD Quality Assurance Manager
- Linda Anthony, Director of Health Information Services
- Linda Wagner, Recipient Rights Officer - Recipient Rights Advisory Committee
- Matt Plaska, Manager of Performance Improvement & Accreditation - Site Review Standards/CARF
- Mickey Wallace, Director of Diversity, Equity, & Inclusion
- Natalie Walther, Director of Data Architecture & Analytics
- Pam Kimble, Director of Quality Assurance
- Shawna Curran, Evaluation & Innovation Specialist - CIRE/Survey Data
- Suzanne Beckman, Clinical Services Manager - Integrated Health Committee
- Urbain Ndoye, Accountant I

ADDITIONAL INITIATIVES

Finance

- Finance has moved back to BS&A with an updated chart of accounts to meet the SCA model. AOD (Attendance on Demand) is currently in the pilot phase, and this will be the last obstacle to becoming fully compliant with SCA. This system will allow HW to allocate staff time based from actual hours worked and in real time. All FY23 year-end reports were submitted with the SCA model.
- HealthWest uses the County's fixed asset system and is signing an agreement with Enterprise Fleet Management to maintain and manage the HW fleet of vehicles.
- The Finance Department is also participating in a KATA project to improve financial processes. They are also flowcharting all activities to make both document protocols and to review for process improvement. This will include all financial and CCBHC financial reports.
- Finally, the CFO contracted with Rehman Robson to update and provide templates and documentation for all MDHHS and LRE financial reports. In the process key elements will be delegated to the director of finance and revenue cycle manager.

ADDITIONAL INITIATIVES

Human Resources

- HR Credentialing processes were established including the use of Laserfiche workflows, tracking spreadsheets and process checklists.
- Credentialing policy updates to match established procedures.
- New background checks policy and standard operating procedure written.
- Credentialing Specialist participation on LRE Credentialing meetings and policy revisions.
- Higher Reach (faster onboarding)
- SkillSurvey Reference Checking System - provides faster reference checking for hiring managers

NOTE: Privileging policy was eliminated, and we do not do formal privileging as it is not required.

Standard cost allocation is being supported by Human Resources through our hiring, internal transfers and position change processes ensuring staff are assigned to the correct cost in the County systems. In addition, maintain the finance staffing spreadsheet when we update costs centers, departments, etc for staff.

Establishing a Grants Workgroup to create processes that ensure the departments who need to know about the grant funding are in the communication loop.

THANK YOU!



HealthWest