

## ATTACHMENT A Milestones and Timeframes

PIHP Name: [NorthCare Network](#) E-mail of contact person: [lolson@up-pathways.org](mailto:lolson@up-pathways.org)

### **ARR Section 11 Achieving Administrative Efficiencies**

Section 11 is the most technical section of the ARR. NorthCare actively sought diverse members and had a team with finance staff from all CMHSPs, two board members, and a parent of a consumer. NAMI was invited to participate but was unable to find a representative. A series of meetings took place during the spring of 2009 which were held in Marquette. Participants could attend in person; telephone or video conferencing. A final work session in April produced the QI plan for this section.

The environmental scan included:

- Review of the implementation of the electronic medical record(ELMER)
- Current reports of the MUNCR and summary views
- Financial costs associated with training staff and the consumer costs of high turnover rates of staff so new staff constantly need to be trained.
- Discussions regarding communication processes between NorthCare, the CMHSPs and the Coordinating agencies and Substance Abuse Service Providers

### **Strengths (Added on 3-18-10) Significant Regional Information Technology Infrastructure**

- 15 county wide area network
- Telepsychiatry
- Common financial application, Great Plains (4 of 5)
- Common Electronic Health Record (HER)negotiated and in place as of 10-09
- EHR Analytics
- Streamlined help desk serving all users of the EHR with the ability to bridge local to regional help desk issues.
- Centralized CAFAS and Locus
- Trusted Windows Domains (4 of 5)
- Centralized network monitoring
- Deployed Internet and computer access to all employees; primary target group paraprofessionals (over 200 users region wide).

### **Challenges:**

- The powerful effect of the lack of regular communication and / or poor communication between NorthCare and the CMHSPs was identified through public meetings and by the team members. It was discussed how administrative efficiencies within the region could be developed and implemented more efficiently and effectively with clear communication strategies between NorthCare and the individual boards. A similar need was recognized with the Substance Abuse Coordinating Agencies in the U.P.

2009 APPLICATION FOR RENEWAL AND RECOMMITMENT TO QUALITY AND COMMUNITY IN  
THE MICHIGAN PUBLIC MENTAL HEALTH SYSTEM

Providers may have to deal with both agencies and their separate practices when dealing with the same consumer. Improving communication is the first QI effort as future successes hinge on good communication.

- In the review of the MUNCR, the team studied the variances in service costs. Several team members are involved in state-wide activities related to alignment of these service costs. Reducing variance is a major focus of the state and it would be worthwhile for the Upper Peninsula to work on the same initiative.
- There is serious concern about consistency of care for the consumers when there is a high turnover rate among direct care staff.
- The EMR (ELMER) will be in place for the region October 2009. Many different opportunities for regional efficiencies will be available. Without careful analysis and prioritizing on a regional basis, the region could get lost in a plethora of projects without adequate staffing to accomplish any of them.
- Training opportunities can be very expensive involving unproductive travel days to Lower Michigan. Staff are required to be away from home for longer periods and driving conditions can lengthen a trip further.

2009 APPLICATION FOR RENEWAL AND RECOMMITMENT TO QUALITY AND COMMUNITY IN  
THE MICHIGAN PUBLIC MENTAL HEALTH SYSTEM

Milestones <b>Section 11</b> <b>Achieving Administrative Efficiencies</b>	Baseline Data (where applicable)	Timeframe for Achieving Milestone: Begin* and end dates	Comments
<b>Milestone 1</b> Communication processes will facilitate better fiscal decision making for the PIHP and the CMHSPs.			
<b>1.1 Develop a system to inform partners of business decisions that affect the region.</b>	<del>09</del> FY10 Original Budget & FTE Allocation Report	1.1.a Q1 FY10 & ongoing	1.1. a. Monthly revisions of Financial Report of the NorthCare Revenues and Expenses will be presented to the CFO, CEOs, and CMHSP Boards. 1.1. b. Amendments to the NorthCare Budget will be presented to NorthCare Finance Committee and the PMC to review efficiencies. 1.1. c. Succession planning with the CMHSPs.  <b>All sections completed in FY10 and ongoing</b>
03/17/2010: 1.1.a.: PIHP is currently waiting on the affiliates to get "up to speed" on ELMER, in order to produce the FSR's 1.1.b.: In place/on-going via standing agenda item for "Regional Finance Group" & S/B on all PMC Agenda's. 1.1.c.: Will be a standing agenda item for "Regional Finance Group" & S/B on all PMC Agendas.			
<b>Q1 FY11</b> All of item #1.1 was accomplished in FY10 and are on-going. 01/11 Pathways: Pathways met with contract providers during October, 2010 to discuss budget issues for FY11 and FY12. We plan on scheduling another one when budget FY12 information received.			
<b>1.2. Administrative staff may be reduced by ELMER implementation.</b>	10/1 Administrative FTE Allocation Report for each board FY = Start up	1.2. a.Q1FY11 & ongoing  1.2.b. <del>Q2&amp;Q3 Q.3 &amp; Q.4</del> FY10 Q1FY11 & ongoing-done 10/29/2010	1.2. a. NorthCare Finance Committee will review Administrative FTE Allocation Reports against the baseline data annually for 3 years following start-up. 1.2. b. NorthCare Finance Committee will present the PMC a process for evaluating the consolidation of administrative functions.
03/17/2010: 1.2.a.: The vehicle for this will be a standing agenda item on the "Regional Finance Group" Agenda. 1.2.b.: The vehicle for this will be a standing agenda item on the "Regional Finance Group" Agenda. 08/10/10:			

2009 APPLICATION FOR RENEWAL AND RECOMMITMENT TO QUALITY AND COMMUNITY IN  
THE MICHIGAN PUBLIC MENTAL HEALTH SYSTEM

<p>1.2.b.: The process was begun at the 06/15/10 Regional Finance Meeting, more work done at the 08/05/10 meeting and will stay with that group.              8-9-10 1.2.b.: The process and the initial list were presented to the PMC              08/10 Pathways -- experienced administrative efficiencies due to implementation of ELMER in 2009 and there was a significant layoff of staff in July, 2009.</p>			
<p><b>Q1 FY11</b>  <b>All of item #1.2 was accomplished in FY10 &amp; FY11 and are on-going.</b></p>			
<p><b>Milestone 2</b>              NorthCare PIHP will achieve reasonable uniformity in costing of Medicaid services.</p>			
<p><b>2.1. Clinical and finance staff will have consistent definitions of individual service codes across the region.</b></p>	<p><del>08</del> 09 MUNCRCR</p>	<p>2.1.a. <del>Q4 FY09</del>  <b>Q.3 FY10-done</b>  <b>06/15/2010</b></p> <p>2.1.b. <del>Q1 FY10</del>  <b>Q.4 FY10-done</b>  <b>06/15/10 &amp;</b>  <b>08/05/10</b></p> <p>2.1.c. <del>Q1 FY11</del>  <b>Q3 FY11-done</b>  <b>06/07/2011</b></p>	<p>2.1.a. Identify 10 codes with largest variance for review</p> <p>2.1.b. Obtain service definition of each code from all boards</p> <p>2.1.c. implement consistent services/codes @ all boards.</p>
<p>03/17/2010:              2.1.a.: Will be requested at the April 1, 2010 "Regional Finance Meeting".              2.1.b.: Will be requested at the April 1, 2010 "Regional Finance Meeting".              2.1.c.: Will be advised of this implementation at the April 1, 2010 "Regional Finance Meeting".              06/15/10:              2.1.a.: These codes were identified; in fact all 20+ codes per the MUNCRCR were identified &amp; reviewed.              06/15/10 2.1.b.: Confirmed that all Boards are following the MA Provider Manual and the Costing Per Code Document.              08/05/10: 2.1.b.: Confirmed that all Boards are following the MA Provider Manual and the Costing Per Code Document.              08/10: Pathways is currently undergoing a costing review of all programs. Participants on the core team include finance and clinical staff.</p>			
<p><b>Q1 FY11</b>  <b>Item #2.1.a. and 2.1.b</b> were accomplished in FY10.  <b>Item #2.1.c:</b> Will be accomplished in Qtr. 2 3of FY11.              11/16/10: 2.1.c. NorthCare is performing the regional authorizations for the initial service entry into outpatient services &amp; in doing so, is addressing part of this and the Finance group is to bring back for implementation at the individual Board level for the rest of this in Q.2.FY11              01/11 Pathways: The results of the costing analysis has been presented to the CEO.              06/2011 – All of Item #2.1 have now been accomplished.</p>			
<p><b>Milestone 3</b>              Direct care workers will create a</p>			

2009 APPLICATION FOR RENEWAL AND RECOMMITMENT TO QUALITY AND COMMUNITY IN  
THE MICHIGAN PUBLIC MENTAL HEALTH SYSTEM

<p>culture of gentleness for consumers living in the residential program.</p>			
<p><b>3.1. Analyze internal direct care staff wages and benefits, in relationship to quality of care for the region.</b></p> <p>Direct Care Staff analysis: Wage &amp; Benefits, training, recruitment, and turnover rates</p>	<p>FY 07-FY 09 HR Records from CMHSP</p>	<p>3.1.a. Q.4 FY10- <del>done</del> &amp; <del>on-going</del></p> <p>3.1.b. Q.1-<del>3</del> 4FY11</p> <p>3.1.c. Q.3<del>2</del> &amp; Q.4<del>3</del> FY11</p>	<p>3.1. a. Pilot analysis CMHSP staff turnover rate for 0-1 yrs and 1-5 yrs of employment</p> <p>3.1.b. Using results, review costs of recruitment, HR, Training, Orientation</p> <p>3.1.c. Work with NorthCare team to assess the impact of staff changes on consumers/families and guardians</p>
<p>03/17/2010: 3.1.a.: HR records/review will be requested via the April 1, 2010 "Regional Finance Meeting".</p> <p>08/05/10: 3.1.a.: Pathways will provide their HR template to all Boards by 08/12/10 and the Boards will return them to NorthCare by 08/20/10, for compiling.</p> <p>8/20/2010 Copper CMHS direct care staff (full-time and relief) turnover rate between October 2009 to July 2010 was 14.38%.</p>			
<p><b>Q1 FY11</b></p> <p>Item #3.1.a was accomplished in FY10 and is on-going.</p> <p>Item #3.1.b. and #3.1.c will be accomplished in Qtr. 4 of FY11.</p> <p>1/3/2011 Copper – direct care staff turnover continues at a low rate of 14%.</p> <p>1/14/11 NBHS assessed and compared the wages of our Direct Care staff in our homes and on 8/1/10 a .61¢ raise was given and on 10/22/10 a 2% raise was given per the State mandate</p> <p>NBHS completed HR template and provided it to NorthCare.</p> <p><b>Q2 &amp;3 FY11</b></p> <p>7/11 HBH-- convened a work group to focus on direct care staff turnover. The results of our analysis indicate that the greatest turnover occurs in individual family homes. We have increased mentor support in these homes and provided additional training and supervision. Effective 10/1/11, we will be increasing the hourly rate for contract direct care staff and entering into negotiations with regular direct care staff.</p>			
<p><b>3.2 .Analyze external direct care staff wages and benefits, in relationship to quality of care for the region.</b></p>		<p>3.2.a. Q3FY10 <del>Q.4 FY10</del> <del>Q.2FY11</del> -done 06/23/2011</p> <p>3.2.b.Q4 FY10 <del>Q.1 FY11</del> <del>Q.2FY11</del> Q.4FY11</p> <p>3.2.c.Q1 &amp; Q2 FY11 <del>Q2 &amp; Q3 FY11</del></p>	<p>3.2. a. Request input from Direct Care Contractors</p> <p>3.2. b Collect data from contract providers regarding staffing, training, and turnover. (Pathways may provide model.)</p> <p>3.2. c. Work with NorthCare team to assess the impact of staff changes on consumers/families and guardians.</p> <p>3.2. d. Analyze data for any differences between the two systems.</p>

2009 APPLICATION FOR RENEWAL AND RECOMMITMENT TO QUALITY AND COMMUNITY IN  
THE MICHIGAN PUBLIC MENTAL HEALTH SYSTEM

		Q 4FY11. 3.2.d. Q4FY11	3.2. e. Coordinate with H.R. and training dept regarding findings and indications for training and wage modification.
<p>03/17/2010: 3.2.a.: A letter will drafted and mailed to the regional providers in Q.4 FY10. 08/05/10: 3.2.a.: Pathways HR will draft a letter for the region and these will be mailed to the regional providers/contractors by September's month end.</p>			
<p><b>Q1 FY11</b> Items #3.2.a. was accomplished in Qtr.3 of FY11. (06/23/2011) Items #3.2.b. and #3.2.c. and #3.2.d. will be accomplished in Qtr. 4 of FY11.</p> <p><b>Q2 &amp;3 FY11</b> 7-25-11 NorthCare—The regional finance group has undertaken a direct care staff survey and will use the results to direct QI efforts to improve staff retention. The letter was sent out to providers on 6-22 stating the ARR workplan suggests we “analyze external direct care staff wages and benefits, in relationship to the quality of care for the region.” Our goal is to determine if there is a relationship between quality of care and high turnover of direct care staff. <u>Please complete the enclosed worksheet for each home that you operate and return to me by July 15, 2011. Should you have any questions please call me at 906-225-7285.(Laurie Heggaton NorthCare Finance Manager).</u> We will have results for the next reporting cycle. 7/11 HBH --In the month of June, our contract aide staff turnover more than doubled, largely due to more lucrative tourist industry jobs and college breaks. Typically, our contract staff turnover is less than 15%. Our regular direct care staff turnover remains low.</p>			
<p><b>Milestone 4</b> Develop efficient service delivery system for substance abuse services.</p>			
<p><b>4.1. The Eastern and Western Coordinating Agencies will effectively manage the multiple funding streams for substance abuse services.</b></p>	08 Legislative Report	<p>4.1.a. Q1 FY10</p> <p>4.1.b. Q3FY10</p> <p>4.1.c. Q1 FY12 FY11—not within CA's locus of control</p> <p>4.1.d. 3/01/11</p>	<p>4.1.a. NorthCare CA will initiate a conversation with the Western UP CA</p> <p>4.1. b. Identification of efficiencies.</p> <p>4.1.c. Legislative Discussion with affected boards/commissions (funding sources).</p> <p>4.1. d. Develop Action Plan to implement Efficiencies.</p>
<p>4.1.b. 8-10 Efficiencies have been identified and discuss with BSAAS. A summary of the efficiencies as well a projected total cost savings was presented to BSAAS in May 2010. Currently waiting for further discussion by BSAAS. 4.1.b &amp;c 1-10-11 The NorthCare CA did receive a response from the BSAAS requesting additional information. As of this date,</p>			

2009 APPLICATION FOR RENEWAL AND RECOMMITMENT TO QUALITY AND COMMUNITY IN  
THE MICHIGAN PUBLIC MENTAL HEALTH SYSTEM

<p>we have not received a response from BSAAS regarding the efficiencies that could be achieved if the two systems merged. The NorthCare CA staff has met with Mark Halkola, Director of the Western Coordinating Agency, on two occasions November 15 and December 20th to discuss efficiencies and SA provider network issues. The discussions hopefully will continue to address recipients of SA services in both CA systems.</p>			
<p><b>Q2&amp;3 FY11</b></p>			
<p><b>7/11 NorthCare Ca</b> met again with Mark Halkola to discuss efficiencies that could be achieved. At this time both CA's will work on supporting social detox in the Eastern U.P. region and focus on trainings that will enhance our clinical service delivery. To date, MDCH has not responded to the information that was requested by each CA over the last year.</p>			
<p><b>Milestone 5</b> Regional Trainings will be provided for CMHSP and SA staff when possible.</p>			
<p><b>5.1. Staff Training</b></p>			
		5.1.a Q3FY10 <b>ongoing FY14</b>	5.1. a. Coordinate activities across the CMHSP and SA providers and develop regional training opportunities.
		5.1.b. 9/1/10	5.1. b. Release regional clinical training opportunities for next 12 months. <b>(Abandoned FY10)</b>
		5.1.c.Q2FY11	5.1.c. Release regional administrative training opportunities.
<p>3-14-10 This milestone will be assigned to the regional training coordinators group. Updates will be provided by that team on a quarterly basis. 3-15-10 The Regional Training Coordinators group has two trainers that have volunteered to write/publish four regional trainings for FY10. Those trainings are: PCP: Living My Own Life; Ethics/Compliance: Ethical Mine Field; Diversity/LEP; and Recovery. Jean Pavlov &amp; Cheryl Palmer have also written an ELMER Update training.</p>			
<p><b>Q1 FY11</b></p>			
<p><b>5.1.a. &amp; 5.1.b.</b> 12-29-10 Due to grant funding and variable support from MDCH it is not possible to generate a calendar 12 month ahead of schedule. Instead a routing method to the CMHSP trainers and key staff at each site has been developed. NorthCare Training Coordinator has a system of outreach and registration that provides ample notice of scheduled trainings. The goal is to have at least two full months notice with a preference of three months. <b>5.1.a.</b> December 1,2,&amp;3,2010 Full day of treatment planning based on Stage of Change was offered to SA providers and CAC CEUs provided . <b>1-3-11 The following trainings were offered in the Upper Peninsula during FY10.</b> 3-11-10 HAB Waiver Training by Deb Ziegler; no CEUs 5-4-10 Consumer Conference with Keynote speaker David Granier; no CEUs 5-24-10 Family PsychoEducation facilitated by Phil Collin; SW CEUs provided 6-7-10 Supported SELF Employment 101 in Houghton by Cathy Maddalena; CEUs provided 6-8-10 Supported SELF Employment 101 in Marquette by Cathy Maddalena; CEUs provided 6-9-10 Supported SELF Employment 101 in Escanaba by Cathy Maddalena; CEUs provided 6-10-10 Supported SELF Employment 101 in Sault Ste. Marie by Cathy Maddalena; CEUs provided 6-15&amp;16-10 Mental Health First Aid in Marquette facilitated by Phil Hefner &amp; Sally Olson</p>			

2009 APPLICATION FOR RENEWAL AND RECOMMITMENT TO QUALITY AND COMMUNITY IN  
THE MICHIGAN PUBLIC MENTAL HEALTH SYSTEM

8-19&20-10 Parents Shining the Light in Marquette facilitated by Mike Bach; CEUs provided  
8-24&25-10 Mental Health First Aid in Wakefield facilitated by Phil Hefner & Sally Olson  
9-15&16-10 Mental Health First Aid in Manistique facilitated by Bonnie Kaunisto and Becky Mills  
9-16&17-10 DDI Training in Marquette  
9-23&23-10 Mental Health First Aid in Sault Ste. Marie facilitated by Bonnie Kaunisto and Becky Mills  
9-28&29-10 Mental Health First Aid in Marquette facilitated by Phil Hefner & Sally Olson  
10-11&12-10 Mental Health First Aid in Houghton facilitated by Phil Hefner & Sally Olson  
11-4&5-10 Working with People Training in Iron Mountain facilitated by Center for Positive Living; CEUs provided  
11-8&9-10 Working with People Training in Marquette facilitated by Center for Positive Living; CEUs provided  
11-9&10-10 Mental Health First Aid in Escanaba facilitated by Phil Hefner & Sally Olson  
11-11&12-10 Working with People Training in Manistique facilitated by Center for Positive Living; CEUs provided  
1/3/2011 Copper's Training coordinator has developed a regional Ethics/compliance training and collaborated on the development of a regional PCP training as well. Both have been implemented

---

---

**Q2&3 FY11**

---

---

7-20-11 The following trainings have been offered by NorthCare:  
1-31 & 2-1, 2011 IDDT in the U.P.  
3-30-11 FPE in the U.P.  
4- 5, 6 & 7-11 Supported Employment using Motivational Interviewing for Peer Support Specialists  
4-15-11 Culture of Gentleness overview  
4-27, 28 & 29, Culture of Gentleness Practicum Training  
5-17-11 U.P. Consumer Conference  
6-27-11 Understanding the Effects of Trauma on Individuals and Communities; held in Marquette  
6-28-11 Understanding the Effects of Trauma on Individuals and Communities; held in Manistique  
6-29-11 Understanding the Effects of Trauma on Individuals and Communities; held in Iron Mountain  
7-12 & 13-11 Making Cents: Motivational Interviewing Relative to Employment; held in Manistique  
7-14 & 15-11 Making Cents: Motivational Interviewing Relative to Employment; held in L'Anse  
**7/11 NorthCare / Pathways & NorthCare CA:** through a grant opportunity from MDCH, DBT training is being offered to the SA Provider network in August. The SA network has participated in the Trauma Training was offered at three sites in June at no cost to the providers and CEUs for social work and CAC were provided.