

Please share something about patient safety and quality that you are proud of in your organization/department on the sticky notes and place on the white paper! We'll use this for future learnings!

November 2025



New Members and Recognitions





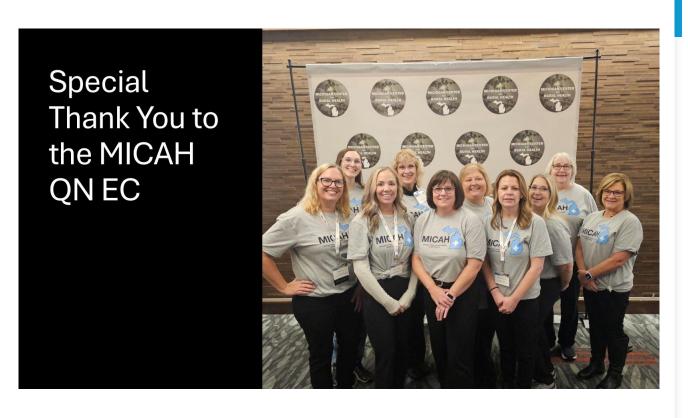


MICAH QN Executive Committee

- Mariah Hesse, University of MI Health System Sparrow Clinton and Carson, Chief Nursing Officer President (Officer)
- Jen Anderson, University of MI Health System, Quality | Community Hospital Lead PI Specialist Vice-President (Officer)
- Christi Salo, Munising Memorial Hospital, Chief Nursing Officer Treasurer (Officer)
- Barb Wainright, Corewell Health, Quality Improvement Specialist, Lead Quality, Safety & Experience Secretary (Officer)
- Heather Schragg. Eaton Rapids Medical Center, Director of Quality, Risk Management, Medical Staff Services -Strategy Group #3 Leader
- Kena Nicholson, Schoolcraft Memorial Hospital, Quality Coordinator Strategy Group #2 Leader
- Tiffany Friar, University of MI Health System Sparrow Eaton and Ionia, Chief Nursing Officer Strategy Group #1
 Leader
- Christine Bissonette, Kalkaska Memorial Hospital, Service Line Director, Acute Care Services Member
- Todd Peltola, Baraga Community Hospital, Director of Quality and Risk Member
- Darcy Donnelly, Aspirus Keweenaw, Director of Nursing Member
- Julia Harbuck-Valley, Scheurer Health, Quality Manager Member
- Kimberly Shiner, Director of Compliance, Quality & Risk Management, Schoolcraft Memorial Hospital Member
- Jennifer S. Duke, Patient Safety Quality Specialist, MyMichigan Health System Member

Putting in the Work so that #NOCAHLEFTBEHIND!

- Monthly MICAH QN Executive Committee Meetings
- Roles on State and National Committees representing CAHs
- Strategic Planning for the Network
- Consistently thinking about Member engagement
- New MICAH QN Member Orientations
- Consistently Modeling How Do We Improve?
 - Evaluation Feedback and Changes
 - Documenting Successes!





Jen Monzo

Congratulations on your retirement, and thank you for everything you have done for MICAH!

Reminder: MICAH QN Priorities

- >Innovation and Alignment of Future State of CAHs
- > Performance Improvement
- **≻**Safety
- **≻**Value of MICAH QN



Innovation and Alignment of Future State of CAHs

To ensure that all MI CAHs are poised to succeed in the future state of the CAH Model (VBC)



How we get there:

- Maximizing Talent from Membership
 - MICAH QN Expertise Excel See Handout!
 - Collection of Best Practices & Sharing of Best Practices at each meeting.
 - 2025 Data: Eleven Peer Presentations!
 - Eaton Rapids Medical Center Closing the gap on HCAHPS
 - Mackinac Straits Health System Rounding with a Purpose
 - McLaren Caro & Thumb OP18B Best Practices
 - UMH Sparrow Carson & Clinton Just in Time Audits and Provider Education
 - Schoolcraft Memorial Hospital Sepsis Screening Tool
 - Aspire Rural Health System Provider Communication Success Story –
 - OSF Escanaba Utilizing MBQIP Metrics to Drive Change OP-18B Lean Project Success Story
 - UMH Sparrow Eaton/Ionia Sepsis Continuing the Journey Information Sharing and Information Gathering
 - ProMedica

 Lessons Learned Sepsis Continuing the Journey Information Sharing and Information Gathering
 - OSF Escanaba Success Case Analysis
 - Munson OP18B
- Ensuring MICAH QN is represented on appropriate National and State Committees
 - MICAH QN Executive Committee reports out on updates from State & National committees at every EC meeting.
- Understanding the Future State of CAHs
 - Focus on CMS Star Rating Thus Far, eCQMS, Planning content related to Current Administration Priorities

Performance Improvement

To ensure that each MI CAH thoroughly understands CAH quality reporting and views the MICAH QN as a resource for Performance Improvement tools.



How we get there:

- ➤ Data Management and Analysis
 - ➤ MICAH QN Data Presentation at each quarterly meeting New in 2025: MICAH QN Scorecard
 - > MBQIP Education and Technical Assistance
 - ➤ Individual benchmarking reports sent to each MI CAH on a quarterly basis
- ➤ Building Performance Improvement Capacity in MI CAHs
 - ➤ CAH Scorecard Showcases
 - ➤ Lean Training
 - Lean Projects at Individual CAHs
 - >IHI Open School

Safety

To ensure that the MICAH QN fosters and measures a Culture of Safety within each MI CAH.



How we get there:

- ➤ Leverage the Culture of Safety Survey
- ➤ Provide Targeted Education on Key Areas of Harm
 - **≻**Sepsis

Value of MICAH QN

To ensure the sustainability and viability of the MICAH QN.



How we get there:

- > Provide valuable resources to each MICAH QN Member
 - Core Meeting metrics related to evaluation of meetings.
- ➤ Ensure CAH Leadership understands the value of the MICAH QN
 - > MI CAH CEO presentation on an Annual basis
 - ➤ Value of MICAH QN Document
- ➤ Showcase MICAH QN

Measure(s) of Success:

- ➤ Engagement Metric: Do you feel a sense of belonging within the MICAH QN?
- ➤ Engagement Metric: Percent of MICAH QN members who present at meetings.
- > Engagement Metric: How valuable did you find the meeting
- > Engagement Metric: MICAH QN Members who use listserv



Strategy Group #1 – Making Care Safer by Reducing the Harm Caused in the Delivery of Care



Strategy Group #2 Data Management and Analysis



Strategy Group #3 – Information Sprints! What CAHs need to know, NOW!

Reminder! Join a Strategy Group

November 2025 Meeting Highlights

Connection!

- Safety Story Opportunity for MI CAH Leaders to share lessons learned surrounding patient safety with their peers.
- MICAH QN Networking Lunch Table (for those interested)
- Facilitated Discussion around Transitions of Care, and OP-18B

Data:

MICAH QN Core Measure Report Out

Partner Updates

MVC Presentation

Best Practice Sharing/Peer Sharing

Success Case Analysis - OSF





Safety Story

OPPORTUNITY TO SHARE LESSONS LEARNED FROM YOU/YOUR ORGANIZATION ON PATIENT SAFETY







Transition to Strategy Group #3







Strategy Group #3 – CAH Priorities!

Information Sprints Bringing What CAH Quality Leaders Need to Know Now Continued Focus on HCAHPS

Members

Chair: Heather Schragg, Eaton Rapids Medical Center Members:

- Jen Anderson (UMH Sparrow)
- Darcy Donnelly (Aspirus Keweenaw)
- Mariah Hesse (UMH Sparrow)
- Kim Shiner (Schoolcraft Memorial Hospital)
- Tesia Looper (iMPROve Health)
- Alex Callaway (Munson Health System)
- Barbara L. Wainright (Corewell Health)
- Christi Salo (Munising Memorial Hospital)
- Debbie Lull (Mackinac Straits Health System)
- Tammy Lovitt (Helen Newberry Joy Hospital)

Thank you to all our members, and welcome to the new members!





Strategy Group #3 – CAH Priorities!

The Why

MI CAH quality leaders are consistently inundated with new information that often impacts their day-to-day work. This Strategy Group works to distill the "noise" and bring the most pertinent hot topics to the membership.

The Aim

To assess new & timely topics that MI CAH quality leaders need to be aware of and provide education on those topics.



Where We've Been/Key Accomplishments

Previous "Sprints" - Social Determinants of Health, Hospital Commitment to Health Equity, Aging, and HCAHPS

Resources:

- ✓ Group Discussion at May 2024 Meeting
- ✓ Peer Presentation: Corewell Health Leveraging JC Requirements to Improve Health Equity
- ✓ Peer Presentation: Community Health Needs Assessments Linking to SDOH screening and Hospital Commitment to Health Equity
- ✓ Peer Presentation: Community Health Worker 101 How to Utilize a CHW to impact SDOH Screening Rates
- ✓ Peer Presentation: Age-Friendly Health System & CMS Age Friendly Measure
- ✓ HCAHPS Resources: Peer Presentations, Data Analysis, Solution Starters







Transitions of Care Roundtables

Transitions of Care Roundtables

Three breakout discussions will focus on different aspects of care transitions:

- Discussion #1 Inpatient to Community Care Partner (SNF, LTC, etc.)

 Moderator: Darcy Donnelly, Aspirus Keweenaw
- Discussion #2 Inpatient/ED Discharge with PCP Follow-Up Moderator: Heather Schragg, Eaton Rapids Medical Center
- Discussion #3 Inpatient/ED Discharge to Behavioral Health Resources. Moderator: Jen Anderson, UMH SParrow & Barb Wainright, Corewell Health (Exploring friction between hospital CMS requirements—e.g., suicide as a Sentinel Event—and behavioral health system constraints such as limited inpatient capacity and prioritization of outpatient care.

Guiding Questions for Roundtables

- Moderators will pose the following discussion questions:
- What quality and patient safety challenges are you seeing?
- If you could fix one thing (outside of funding) that would add the most value, what would it be?
- What does "wildly successful" look like to you?



Transition to Strategy Group #2







Strategy Group #1 – Making Care Safer by Reducing the Harm Caused in the Delivery of Care

Members

Chair: Tiffany Friar, UMH Sparrow Eaton & Ionia Members:

- Jennifer Dyke (ProMedica)
- Montserrat Gower (Beacon Health)
- Kathleen Miedema (Beacon Health)
- Christine Bissonette (Kalkaska Memorial Hospital)
- Christi Salo (Munising Memorial Hospital)
- Melissa Schneider (Trinity Health Lakeshore)
- Megan Maki (OSF Healthcare)
- Andrea Porter (MyMichigan)
- Britney L. McPheron (Trinity Health Lakeshore)
- Julia Guest (Corewell Health)
- Jen Anderson (UMH Sparrow)

Barbara L. Wainright (Corewell Health)



Strategy Group #1 – Making Care Safer

The Why

Every patient deserves safe and high-quality care. MI CAH Quality leaders strive each day for zero harm, and to provide the highest level of care.

The Aim

This Strategy Group aims to provide an opportunity to identify common areas for CAH improvement and share best practices. By analyzing patient safety data & aligning CAH priorities, this group offers best practice and peer sharing opportunities, with the intention of improving patient outcomes.



The IMPACT (Key Accomplishments & Successes)

Successes:

- Consistent process for receiving feedback from membership on patient safety priorities.
- Currently, feedback has been received from SG#1 around patient safety priorities, with Sepsis being identified as a top priority. After that analysis, another survey was deployed to understand the nuances of opportunities within Sepsis care.

How have we impacted the MICAH QN?

- SG #1 has built a safe space around patient safety/quality where everyone feels comfortable sharing their specific opportunities related to patient safety.
- SG #1 has consistent attendance and engagement of MICAH QN members.
- SG #1 has increased training opportunities for Patient Safety training (Basic Certificate in Patient Safety and Quality, Lean Training).

Opportunities:

More robust set of Patient Safety Data (readmissions, infections, falls, etc). MCRH in process
of getting access to NHSN.

Strategy Group #1 Making Care Safer by Reducing the Harm Caused in the Delivery of Care

2024 Education:

- > Facilitated Discussions around:
 - ➤ Increasing event reporting
 - ➤ Workplace Violence
- ➤ Best Practice Sharing around:
 - ➤ Readmissions MyMichigan
 - Front Line Education MyMichigan
 - Sepsis Michigan Hospital Medicine Safety Consortium & Aspirus Health



Strategy Group #1 Making Care Safer by Reducing the Harm Caused in the Delivery of Care

2025 Education:

- Step 1: Assessment of MI CAH Priorities – found Sepsis was a high priority.
- Step 2: Analysis of what components within a Sepsis protocol were "pebbles in your shoes".
- Step 3: Provide education based upon results
 - May Schoolcraft and UMH Sparrow Carson & Clinton
 - August ProMedica



MICAH QN Annual Meeting

Treasury Update:

- The MICAH QN has \$3,361 in the PNC Banking Account.
- Dues will be assessed (\$100) in the CY 25. Assist with food/beverage at MICAH QN meetings.

Reminder of Bylaws:

- Strategy Group Participation
- Meeting Participation and Engagement

MICAH QN Meeting Schedule

*Please note changes to dates on the agenda



MICAH QN Member Meeting Calendar (2026)

- February 20th, 2026 Virtual
- May 2026 Grand Traverse Resort, Traverse City, MI
- August 21st, 2026 Virtual
- October/November 2026 In alignment with MI CAH Conference, held at the Park Place Resort, in Traverse City MI.