

Quality Directors' Meeting Agenda

Tuesday, February 24th at 3PM

Via Teams link

Thursday, February 26th at 9AM

Via Teams link

EQMI Data Quality

- Meetings will be recorded for minutes, then deleted
- Functional Assessments – DLA-20 trainings- reach out to Elizabeth.Feder@ct.gov Standing item for staff needing DLA 20 basic training reach out to Liz Feder or Meagan McGuire. If staff is interested in the train-the-trainer series, they need to have this basic DLA training first. Offered monthly rotating between Monday, Wednesday and Friday. If you have a large group at your agency, EQMI can do an individualized training in person or virtually.
 - Only staff who have successfully completed the training can administer DLA Only staff who have received a formal Certificate of Completion can complete the assessment
 - Must use anchors, not just EHR descriptions
 - Updated materials available – reach out to Liz or Meagan
 - Individual agency training – 10 or more folx
- *Data Corrections – EQMI:*
 - Wei (A-K) – Wei.Wei@ct.gov
 - Jordon (L-Z) – Jordon.Vassell@ct.gov
 - Correct duplicates!

Jordon and Wei reach out to correct the origin of the problem - Wei DDaP will create a duplicate for client admissions if there is any discrepancy in client profiles. The primary identifier of client would be SSN, date of birth, and full names. Any discrepancy of those 3 identifiers will read that as a completely new client and create a new admission for the client. We have an ongoing process of locating them and cleaning them. We do want to make sure that all services and assessments are kept intact under one admission and then we can remove the other one. So if your agencies have duplicated missions Jordon or Wei will reach out with the instructions on how to remove them in cases where we notice differences between the admissions. For example, different sets of services or assessments or different discharge status, we'll have to ask you to verify the accuracy of that admission data 1st and then move or RE upload services and assessments if necessary. Most importantly, we need you to update your client profile in your record to remove the root cause of what created the duplicates in the first place. Duplicates are potentially skewing all of your program performance metrics and inflating your roster as well.

- Provider Alert: Updates to DDaP diagnosis and service codes If you have questions about specific updates, please contact Meagan for more information
 - Will receive errors for diagnosis other than ICD 10 (except 799.9)
 - Service codes to include corrected IOP codes for MH and SUD
 - And others (Audio-visual codes for new clients)
- Annual Contact Management review the Contact Management review forms were sent out to agencies to look over. Contact Management is EQMI's repository of agency contacts for various purposes and to receive specifically identified communications. Please review and return by April 1st. If you have any questions or did not receive the forms, reach out to Meagan, Jordon or Wei.

Consumer Satisfaction

- FY26 Consumer Satisfaction materials is on EQMI website [CSS close June 30th, 2026](#). Website is active with updated materials. Reach out to Tricia.Lang@ct.gov or Kristen.Miller@ct.gov with questions
 - [EQMI Website Consumer Survey](#)

Quarterly Quality Dashboards

- Data due by 15th of the following month (ex. May 15th for April data)
- FY26 Q2 Dashboard Drafts to be sent out for review
 - Contact Meagan McGuire with any questions or concerns
- Metrics Review: Self Help and Social Support
 - [Quality Dashboard Review Guide](#)
 - Update in progress to be completed by April 1st
- Metrics Reports: Outcome Measures folder → NOMS Values

File Upload

- New E.H.R./other issues- reach out to Meagan.McGuire@ct.gov If you have a new EHR or one in the works and concerns about file uploads or other data quality concerns, let us know and we can work with you all to troubleshoot file uploads and/or direct data entry to DDaP

Critical Incident Reporting

- Real time review of CI – may receive inquiries about updates or changes to CI reports [EQMI working on real time review of Critical Incidents so your agency may receive questions about specific incidents that need clarification](#)
 - Need contacts for CI reporting
- EDW: Critical Incident Overdue report Closures are due within 60 days of submission to DDaP. There is an Overdue Critical Incident EDW report that measures the 60 days from reported entry in DDaP rather than the reported incident date. Coordinate with SO LMHA or OOC contact to report, submit and close CI.
 - Wei and Jordon will be reaching out
 - Closures due in 60 days from report

Monthly Quality Directors Calls Schedule:

Tuesdays at 3:00 PM	Thursdays at 9:00 AM
March 24th, 2026	March 26th, 2026
April 28th, 2026	April 30th, 2026

Monthly Training Schedule:

February 27th, 2026	9:30 – 11 a.m. Direct Data Entry	11-1 p.m. EDW Reports	2-3 p.m. CI
March 27th, 2026	9:30 – 11 a.m. Direct Data Entry	11-1 p.m. EDW Reports	2-3 p.m. CI

Monthly DLA-20 Training Schedule:

March 11th, 2026	Wednesday 8:30am-12:30pm	Liz Feder
April 15th, 2026	Wednesday 8:30am-12:30pm	Meagan McGuire

Click here to access our website: [EQMI - Home Page \(ct.gov\)](#)

Click here to access EQMI training calendar: [EQMI FY 2026 Training Calendar](#)