

**NORTH CENTRAL COMMUNITY SERVICES PROGRAM
BOARD MEETING MINUTES**

April 28, 2016

12:00 Noon

NCHC – Antigo Campus

Present:

X	Randy Balk	X	Ben Bliven	X	Jean Burgener
EXC	Joanne Kelly	X	Holly Matucheski	X	Bill Metter
X	Bill Miller	X	Scott Parks	X	Dr. Eric Penniman
X	John Robinson	X	Greta Rusch	X	Robin Stowe
X	Bob Weaver	X	Jeff Zriny		

Also present: Gary Bezucha, Brenda Glodowski, Kim Gochanour, Laura Scudiere, Ron Nye, Gary Olsen, Debbie Osowski, Michael Loy, Becky Schultz, Sue Matis

Board meeting was called to order at 12:08 p.m.

Recognition of and presentations to Ron Nye and Dr. Penniman were made by Chair Zriny for their participation and service to the NCCSP Board and the community; introduction of Robin Stowe as new board member representing Langlade County; and introduced Sue Matis, Interim Human Resources Senior Executive. Presentation was also made to Gary Bezucha, by Chair Zriny, in recognition of his retirement and years of service as the CEO of North Central Health Care.

Consent agenda

- **Motion**/second, Burgener/Metter, to approve the consent agenda which includes the 3/31/16 NCCSP Board meeting minutes. Motion carried.

Chairperson's report

- The Executive Committee reviewed the Performance Management Contract approved by county board as a precursor to the proposed alternate approach developed with Counsel. The Executive Committee authorized the Interim CEO to continue to move forward with proposed alternatives.
- The Executive Committee approved and is recommending the amendment to the NCCSP Bylaws to allow the appointment of vice-chairs to NCCSP Board Committees.
- **Motion**/second, Weaver/Robinson, to approve the amendment to the NCCSP Bylaws. Motion carried.

Finance, Personnel & Property Committee report

- Committee met today and reviewed the March financial statements, received an update on the newly established IT Governance Committee, and reviewed the 2015 Year End Fund Balance/Invested Cash by County policy.
- Accounts Receivable Action plan was also reviewed which will be discussed later in this meeting.

Financial report

- Deficit for March of \$406,000 contributed almost entirely in the expense area; health insurance was over by \$214,000, other institutes were over by \$170,000, drugs were also high due mostly to the hospital.

- Revenue is OK but there is room for improvement.
- Action plans related to the Behavioral Health Unit-Inpatient Hospital and Mount View Care Center were reviewed (see attached).
 - Diligently looking for ways to optimize revenues and minimize expenses including pharmacy, enrollment process, productivity targets.
 - Reviewing services to the criminal justice system to verify if changes have made a difference in areas such as recidivism, etc. and at financial impact.
 - Process improvement teams monitoring progress and working together for a successful system.
- **Motion**/second, Burgener/Weaver, to accept the financial report for March. Motion carried.

Quality Committee Report

- Organizational Quality Dashboard was reviewed.
 - Patient experience indicator not going in the direction we want. Working on improving the processes of survey volumes and returns. April data is showing improvement in this area.
 - Community Partner indicator for the first quarter is within target. Receiving more positive feedback from the community.
 - Overall clinical indicators are solid.
 - Access to behavioral health services is heading in the right direction. Driven largely by a remarkable turn-around in outpatient services.
 - Days in Accounts Receivable continues to head in the right direction.
 - Regarding performance metrics, the board would like NCHC to engage the community in identifying/meeting expectations of the external customers.
 - Board members expressed the need to share successes with community partners and encouraged the county board representatives to share NCHC successes with the rest of the County Board members.
 - **Motion**/second to approve the Quality Outcome Dashboard. Motion carried.
- Crisis Process Improvement update
 - Presentations have been made to many community partners and county board meetings.
 - Last summer the Quality Committee identified from qualitative feedback on the survey and outcome measures, to look at how we provide crisis services. In October a team was initiated including representatives from law enforcement, all three counties, ER's, NCHC and primary care providers, and Bridge Clinic. The team applied a systematic review and developed a work plan. Key elements/status include:
 - Changes to how NCHC staff crisis services. Results are reflected on the partner survey. New staff doing very well and having impact.
 - Formulating a different crisis service model to provide immediate crisis care as well as assessment and referral. Volume continues to increase as well as complexity. New care model being deployed includes a nurse in the crisis service area, possible stabilization services in crisis, coordinating with area ER's to manage movement between crisis and the emergency room, including identifying medical clearance criteria, better collaboration with providers, etc.
 - Chief Deputy Chad Billeb was recognized for his leadership in promoting a new educational concept on how law enforcement handles people in crisis.
 - Laura attended a Crisis Intervention Team (CIT) conference in Chicago with law enforcement representatives. Program is evidence-based, collaborative with

law enforcement and community providers on how to provide assessment and deal with individuals in crisis.

- A van has been provided for the purpose of transporting individuals between facilities. Working on whether law enforcement or mental health professionals will do transport.
- Board members expressed concern with how these positive efforts and results are being communicated in lieu of the vote of the Marathon County Board in September as to whether or not to continue in the Tri-County Agreement.
 - o Facts must be provided
 - o We must work together as a community
 - o NCHC is more than just crisis services
 - o Collaboration has made a positive difference
 - o Education and ownership is valuable
 - o There must be a sense of urgency to delivering these important messages to the counties with every opportunity.

Human Services Operations Committee

- Refocusing meetings into policy resources.
- Looking at information reporting to the committee relating to issues before us at county.
- Developing metrics for tracking, etc. and looking at outcomes.
- Looking at how we can be a leader in assessment and treatment.

Nursing Home Operations Committee

- Looking to invite non-board members to participate on the committee.
- Asked Executive Team to investigate the number of licensed nursing home beds, impact of a reduction in licensed beds, bed hold expenses, etc.
- Committee feels the nursing home renovation project should be reviewed as it has been two years since its development. Want to provide a current and viable document when asked.
- NCHC is currently working with Marathon County Facilities and Maintenance on a 5-Year Capital Plan (broad vision). Plan will be reviewed with Committees and the Board next month, followed by the County Health & Human Services Committee before going to CIP.

2016 Operational Plan quarterly update

- A current Operational Plan was distributed and reviewed.
- The Operational Plan is the internal work plan to meet operational objectives.

Medical Staff Credentialing

- **Motion**/second, Metter/ Burgener, to approve the following reappointments as recommended by the Medical Staff:
 - o Jessica Altis, PA-C
 - o Jean Baribeau-Anaya, PA-C
 - o Joan Hauer, APNP
 - o Diane Mansfield, APNP
 - o Ruth Nelson-Lau, APNP
 - o Barb Torgerson, PA-C

Update on Ongoing Initiatives with County

- Have reviewed operational objectives with Marathon County and also supporting the county in what is best for the community.
- Recommendation of Oversight Task Force were approved.

- Performance contract was given to NCHC to consider and continue with negotiations. Working with Scott Corbett and Brad Karger to clarify our relationship, create framework, and manage expectations and performance.
- Continue to scope out and working on parameters with transferring maintenance services to Marathon County. Do not feel changes will happen before first of year.
- Transition Oversight Task Force is working to clarify the decision being voted on in September and oversees the Administrative Workgroup which has been meeting weekly for several months.
- Morningside Needs Assessment – Morningside has been onsite once in March, met with executive team. Have had limited interactions. We have provided an enormous amount of information. Their recommendations should be received in June.
- Marathon County is actively involved in new priority based budgeting program. NCHC was not previously part of this but is now participating.

Overview of Financial Implications

- 2016 Budget Analysis of Marathon County and Lincoln/Langlade was reviewed (attached).
- The bulk of shared services are located at Wausau Campus.
- Likely Marathon County would maintain services so all revenue and expense would stay with Marathon County as well as the overhead.
- Must stay on top of federal and state funding; if the CCS program is a single county, the rates revert back to prior structure which would decrease revenue by approximately \$1.3 million. All programs would need to be re-credentialed and NCHC state grants would be reallocated.
- A plan would need to be in place for how the accounts receivable balance would be distributed.
- All NPI numbers stay with NCHC.
- Client records stay with NCHC. The state was clear that Marathon County would need to get authorization from every client, plus there would be an expense to getting copies of a record.
- Challenges would occur in billing and accounts receivable with new and ID provider numbers.
- Several important items to consider: Costs to ‘flip the switch’ while maintaining the same level of service, and transitional costs which could be greater.
- We will continue to provide more information and how these changes could impact services.

CEO Report

- Our crisis staff in Langlade County have been active in supporting the community following the recent shooting. Counselors have met with over 100 students and will continue to provide aftercare.
- Dr. Ticho, Inpatient Psychiatrist/Medical Director, is reducing to part-time beginning in June.
- Looking to have board retreat soon.
- First week in June we are inviting all three county board members to come to the Wausau Campus, tour, present annual report, and engage in conversations with leaders and staff.
- Please sign up and attend Just Like Us event and support North Central Health Foundation.

Future agenda items

- Communication/activities

Motion/second, Penniman/Bliven, to adjourn at 2:07 p.m. Motion carried.