

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

May 26, 2016

12:00 Noon

NCHC – Wausau Campus

## Present:

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

Also present: Michael Loy, Brenda Glodowski, Kim Gochanour, Laura Scudiere, Becky Schultz, Sue Matis, Debbie Osowski

Guest: Rick Seefeldt, John Fisher

Board meeting was called to order at 12:08 p.m., roll call taken, and a quorum noted.

## Consent agenda

- **Motion**/second, Metter/Rusch, to approve the consent agenda which includes the 4/28/16 NCCSP Board Meeting minutes. Motion carried.

## Chairperson's report

- The Executive Committee discussed the appointments of Board members to committees, including vice-chair appointments.
  - **Motion/second**, Weaver/Miller, to approve the recommendations of appointments as follows:
    - Robin Stowe – Executive Committee
    - Margaret Donnelly – non-board member of the Nursing Home Operations Committee
    - Dr. Steve Benson – Quality Committee (upon official appointment to Board)
    - Randy Balk - Vice-Chair, Finance, Personnel & Property Committee
    - Greta Rusch - Vice-Chair, Human Services Operations Committee
    - Bill Metter - Vice-Chair, Nursing Home Operations Committee
    - Ben Bliven - Vice-Chair, Quality Committee

## Motion carried.

Finance, Personnel & Property Committee report

- Nursing home census continues to struggle; hospital is busy.
  - Combined statement of Revenue and Expense shows a loss of \$308,000 due primarily to:
    - Out of county placements (state institutes). As a reminder, when out of county placements occur it is due to either full capacity, individual is under age 13, individuals are not allowed roommates, if adolescent is on unit and documented sex offender is needing admission.
    - Nursing home is working diligently to bring expenses in line i.e. working on staffing model, compensation, and utilization of staff.
  - Reviewed collateralization of funds.
  - Beginning 2017 budget process in May.

### Financial report

- Showed a small gain of just over \$1,500.
- Expense management continues to be a focus.
- **Motion/second**, Weaver/Kelly, to approve the financial report. Motion carried.

### Quality Committee Report

- Organizational dashboard was reviewed.
  - Patient experience is a major initiative; maintaining in the 40% range. An average of 190 surveys is sent each month. Not many responses below 7; majority score a 7-8; top box is 9-10 (scale of 1-10).
  - Crisis Treatment: Collaborative Outcome Rate is under discussion. The Crisis Process Improvement team has identified a method to receive immediate response to a one question survey 'How collaborative staff are' from our partners i.e. law enforcement, primary care provider, etc. scored on a scale of 1 to 5. Currently have 10 days of data, 49 cards received, 3 indicated '4' and 46 indicated '5'.
  - Services to criminal justice system – Can begin collecting data once management contract is initiated and metric(s) identified.
- **Motion/second**, Balk/Kelly, to accept the Organizational Quality Dashboard. Motion carried.

### Human Services Operations Committee

- The Crisis Structure Modification Proposal was reviewed by the committee.
  - Proposal is to phase in an expanded model of care.
  - Additional staff is needed to meet demands, implement a larger scale care model transition, and lay the foundation of this model of care.
  - Call volume in crisis contacts has doubled and year to date we are on track to increase volume again.
  - The increased expenses experienced to date is due to this model which was developed after 2016 budget process was identified but it will be built into the 2017 budget as a line item. These recommendations have come out of the crisis pi team.
  - This would add approximately \$528,000 in additional costs but will prove to be what is necessary.
  - 2016 cost is 98,879 for implementation of the transportation which includes all three counties.
- **Motion/second**, Balk/Metter, to approve Crisis Structure Modification Proposal and to exceed budget expectation for remainder of 2016. Motion carried.
- Committee discussed two major operational changes i.e. Community Corner Clubhouse Hope House Concept which will be a pilot for one year, and the Bellewood CBRF facility transitioning to Andrea Street which will allow for expansion of services, and increased profit margin.

### Nursing Home Operations Committee

- Margaret Donnelly, from Aspirus, agreed and has been approved to be a non-board committee member.
- Concern expressed about the changes in the 5-Star Rating program which will be reviewed in depth at another meeting.
- Committee will be discussing the \$15 million nursing home remodel project including the substantial reimbursement from the state when renovations are made.

- Committee commended the entire leadership team. NCHC is not what it was a year ago. All of the changes in the last year are good and a result largely because of an excellent leadership team. Board agreed.

#### NCHC Facilities Capital Plan and CIP Requests

- The vision was laid out in documents and reviewed with each operational committee of the Board and approved. The pool and nursing home will be submitted under a separate process.
- Eight projects were submitted to Marathon County Capital Improvement (CIP) for ranking which takes place in mid-July.
- **Motion/second**, Miller/Weaver, to approve the 5-year Facilities Capital Plan with the exception of the nursing home remodeling and pool projects. Motion carried.

#### Collaborative Care Model

- John Fisher, Ruder Ware, provided an overview of the Collaborative Care Model.
- In January Marathon County passed the Performance Management Contract specific to services provided to the offender population to Marathon County working on clarifying expectations.
- Collaborative Care Model is the foundation and groundwork to strengthen the relationship with our County partners including the level of communication and responsiveness.
- This model allows the committee to discuss information about individuals we serve (if necessary to resolve an issue), with no legal risk, moving the conversations into a two-way communication link. Discussion of identifiable and confidential information outside of this committee is prohibited.
- **Motion/second**, Metter/Balk, to endorse the concept and empower the Senior Executive Team and the Executive Committee of the Board to move forward with the Collaborative Care Model and report back to the Board. Suggestion made to include the Chair of the Quality Committee also. Motion carried.

#### Performance Management Contract

- Working copy of the Performance Management Contract was distributed and reviewed.
- Markups by Michael Loy and Scott Corbett were reviewed.
- **Motion/second**, Miller/Metter, to approve the noted changes and forward to Scott Corbett, Marathon County Corporation Counsel. Motion carried.

#### LeadingChoice Network Participation Agreement

- LeadingAge is a membership organization for skilled nursing homes in the State of which we have been a member for a long time.
- The organization saw the need to assist its members with group contracting. We feel there are many benefits to the contracting process and resources. To end contract, we would provide 120 day notice. Legal counsel is reviewing contract.
- **Motion/second**, Metter/Weaver, to move forward with the Participation Agreement. Motion carried.

Dr. Black Event on May 12, 2016

- After the event, we learned that the call was initially received in Crisis from Outpatient Services.
- This is initiated in one of two ways: through a hardwired system or remote buttons.
- Crisis protocol is to call the area where the alert came from to verify the emergency. When this was done there was no response in Outpatient Services which initiated protocol to call 911.
- Internal Dr. Black is called and the building goes into lock down. In the process, an employee sent incorrect information in a text that there was a gun in the building.
- Law Enforcement had to treat this as a real situation regardless.
- After extensive evaluation, many interviews with staff and individuals involved, we have determined that it was an undetermined system failure.
- Have identified areas to strengthen our system.
- Law Enforcement was professional and did an excellent job.
- Replacement of the system was already in place and will continue to pursue. Will be including the installation of security cameras, better floor plans, better communications, improved radio system, and others.
- Michael Loy and the leadership team were commended. Thanks to Ben Bliven, Scott Parks and the law enforcement agencies they represent, who were here as well helping in the situation.

CEO Report

- Transition Oversight Task Force is responsible for crafting the question for the Marathon County Board in September regarding the relationship with North Central Health Care.
- Morningside report is expected July 11 at 7 p.m.
- Invitation distributed for an Annual Meeting inviting all three county board of supervisors to NCHC. Will be talking about NCHC accomplishments of 2015, what we are working on in 2016, providing a walking tour with leaders available in each area to talk about their program and answer questions. A great way to see and experience what NCHC is about.

Future agenda items

- No items noted.

**Motion/second**, Miller/Parks, to adjourn at 2:03 p.m. Motion carried.

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