



North Central Health Care

Person centered. Outcome focused.

NORTH CENTRAL COMMUNITY SERVICES PROGRAM

OFFICIAL NOTICE AND AGENDA of a meeting of the Board or a Committee

A meeting of the Human Services Operations Committee will be held at North Central Health Care, 1100 Lake View Dr., Wausau, WI, Board Room at 8:00 a.m., on Wednesday, September 9th, 2015.

(In addition to attendance in person at the location described above, Committee members and the public are invited to attend by telephone conference. Persons wishing to attend the meeting by phone should contact Debbie Osowski at 715-848-4405 by one hour prior to the meeting start time for further instructions.)

AGENDA

1. Call to order
2. Consent Agenda
 - a. Action: approve consent agenda:
 - 1) Minutes of 07/16/15 meeting
 - 2) Financial update
3. Human Services Report
4. Updates:
 - a. Psychiatry update (Gary)
 - b. Aquatic update (Gary)
 - c. ADHD program update
 - d. Early childhood/intervention services
5. Independent/External Evaluation of Crisis Services
6. Collaboration with Social Services regarding youth crisis options
7. Future items for Committee consideration
8. Adjourn

- If time permits, beginning discussions may take place on future agenda items.
- Action may be taken on any agenda items.
- In the event that any individuals attending this meeting may constitute a quorum of another governmental body, the existence of the quorum shall not constitute a meeting as no action by such body is contemplated.

Signed: /s/Gary Bezucha
Presiding Officer or His Designee

COPY OF NOTICE DISTRIBUTED TO:

Wausau Daily Herald Antigo Daily Journal
 Tomahawk Leader Merrill Foto News
 Langlade, Lincoln & Marathon County Clerk Offices
 DATE 09/04/15 TIME 11:00 a.m.
 VIA: X FAX X MAIL
 BY: /s/ Dianna Schlicher

THIS NOTICE POSTED AT

NORTH CENTRAL HEALTH CARE
 DATE 09-04-15 Time 11:00 a.m.
 By Dianna Schlicher
 Any person planning to attend this meeting who needs some type of special accommodation in order to participate should call 715-848-4405.
 For TDD telephone service, call 715-845-4928.

**NORTH CENTRAL COMMUNITY SERVICES PROGRAM
HUMAN SERVICES OPERATIONS COMMITTEE
MEETING MINUTES**

July 16, 2015

3:00 p.m.

NCHC – Wausau Campus

Present:

X	John Robinson	X	(via phone) Holly Matucheski	X	Joanne Kelly
EXC	Greta Rusch	X	Nancy Bergstrom	X	Lee Shipway
X	Linda Haney	X	Scott Parks		

Also Present: Toni Simonson, Brenda Glodowski, Gary Bezucha, Debbie Osowski, Michelle Hazuka, Marlene Patton, Brenda Budnik

The meeting was called to order, roll call was noted and a quorum declared.

Welcome and introductions were made.

Consent Agenda

- **Motion**/second, Bergstrom/Kelly, to approve the consent agenda, which includes the minutes of the 1/21/15 meeting and the financial reports. Motion carried.

Human Services Operations Report

- Aquatic Services
 - Due to increased volumes of individuals seeking services in Aquatic Therapy, a contract for a physical therapist has been initiated and recruitment is underway.
- Medically Management Treatment (MMT) – previously known as ‘residential treatment’
 - We are waiting for the on-site survey from DHS.
 - The survey was scheduled for last week; however, the surveyor for this area is no longer with DHS.
 - We are contacting the Director of Certification to see how we can expedite the survey process.
 - Program is ready to open as soon as it is certified.
 - Robin Stowe, Langlade County has been informed of delay; Nancy Bergstrom will take info back to Lincoln County; will contact Craig McEwen, Public Safety Committee of delay
 - MMT will have 6 beds
 - Anticipate eventual expansion of the program due to the high number of inquiries and current wait list
- Marathon County Jail
 - Currently recruiting for positions to provide 24/7 coverage throughout entire region with availability of our staff to go into the jail to provide services.
 - Expanding these services to the Lincoln and Langlade County jails also by Sept. 1.
 - Staff currently being trained to work with forensic population; recruiting for individual with forensic background.

- Day Treatment
 - Opened April, 2015
 - Capacity of 8 filled during first week
 - Waiting list of 8-10 since program opened
 - Hoping to add an additional clinician for next year
 - Working with transportation system so individuals in Lincoln and Langlade Counties can make use of the program easier

Educational Session – Clubhouse – Michelle Hazuka

- Marlene Patton, consumer, provided overview of Clubhouse
- Clubhouse program relocated in May to 811 North Third Avenue, Wausau
- Clubhouse is an internationally certified program; 1 of 6 in Wisconsin
- Accredited since 2006; services have existed since 1996
- 117 active members; 5 staff
- Clubhouse Overview and Mission Statement were distributed
- All are welcome to stop in at any time
- Strategic planning is a priority including marketing and a better understanding on how to access services including: establishing focus groups with probation/parole, Sheriff's Dept., etc. Additional suggestions were to send out brochures to private therapy offices in an effort to improve knowledge of program and access to services.

Mental Health Services to the jail

- Sheriff Parks commented that with the 8 hours of tele-psychiatry, up to 40 hours/week of forensic counseling, additional access to crisis staff, open dialogue and communication, that we are showing progress and making a difference for those housed at the jail. He feels this could be a pilot for the State.
- A Workgroup has been meeting weekly (or more often as needed) to develop a process flow including screening for mental health and substance abuse disorders using Stepping Up tools, established forensic counselor and tele-psychiatry, recruitment for another forensic counselor for additional coverage, recruitment of additional crisis workers which will help with deploying individuals as necessary, and establishing services in Langlade and Lincoln Counties also.
- These initiatives are being funded through the NCHC Innovation Fund which is used for unanticipated innovative programs. The fund was developed several years ago at the request of the Board.
- This is a pilot program which will continue through 2015 and if successful (evidenced based) will move into the other Counties. Langlade County has requested 24/7 crisis services now which we are working.
- NCHC is pleased with the collaboration with the Sheriff's Dept. and thrilled about the positive impact on the inmates of the jail, the jailer(s), personal lives of employees, spouses, and families of all involved – inmates and staff alike.
- Committee would like to continue to be brought up to date, tracking community support, transition into the community, etc.

Psychiatry update

- New psychiatrist, Dr. Brigitte Espinoza, will be joining us soon. Processing of her J1Visa paperwork has been delayed due to a system failure at the federal level. She is excited to start.

- Psychiatry residency program has obtained the number of stipends needed for the program. In process of writing the application which must be completed in September and then anticipate a site visit before the end of the year. The program is on target to begin with three residents in July 2017 with graduation in 2021.

Aquatic update

- The Capital Improvement request is going to committee for ranking next week which will include the pool.

Future agenda items for consideration

- ADHD program
- Early childhood/intervention services
- Mental health program updates

Motion/second, Bergstrom/Kelly, to adjourn the meeting at 4:25 p.m. Motion carried.

dko

North Central Health Care
Review of 2015 Services
Langlade County

08/20/2015

	2015 July Actual Rev	2015 July Budg Rev	Variance	2015 July Actual Exp	2015 July Budg Exp	Variance	Variance by Program
Direct Services:							
Outpatient Services	\$242,152	\$239,136	\$3,016	\$361,702	\$395,616	\$33,914	\$36,930
Psychiatry Services	\$24,970	\$14,788	\$10,183	\$131,022	\$128,588	(\$2,434)	\$7,748
Community Treatment Day Services	\$329,201	\$385,295	(\$56,094)	\$432,444	\$471,640	\$39,196	(\$16,899)
Children's Services	\$292,205	\$330,255	(\$38,050)	\$248,095	\$293,078	\$44,983	\$6,933
	\$36,602	\$46,475	(\$9,873)	\$125,120	\$95,131	(\$29,989)	(\$39,863)
	\$925,130	\$1,015,949	(\$90,819)	\$1,298,383	\$1,384,052	\$85,669	(\$5,150)
Shared Services:							
Inpatient	\$260,672	\$199,109	\$61,563	\$396,742	\$330,336	(\$66,406)	(\$4,843)
CBRF	\$54,833	\$24,768	\$30,065	\$31,976	\$51,574	\$19,598	\$49,662
Crisis	\$4,121	\$4,430	(\$309)	\$32,293	\$31,016	(\$1,277)	(\$1,587)
AODA Day Hospital	\$3,519	\$6,930	(\$3,411)	\$4,310	\$11,984	\$7,674	\$4,263
Protective Services	\$14,620	\$14,566	\$54	\$33,836	\$35,976	\$2,140	\$2,194
Birth To Three	\$39,186	\$76,077	(\$36,891)	\$68,499	\$142,108	\$73,609	\$36,718
Group Homes	\$77,714	\$79,140	(\$1,426)	\$74,741	\$82,732	\$7,991	\$6,566
Supported Apartments	\$88,981	\$91,636	(\$2,655)	\$82,373	\$86,667	\$4,294	\$1,639
Contract Services	\$2,621	\$0	\$2,621	\$84,513	\$45,033	(\$39,480)	(\$36,859)
	\$546,267	\$496,657	\$49,610	\$809,283	\$817,426	\$8,143	\$57,753
Totals	\$1,471,397	\$1,512,606	(\$41,209)	\$2,107,666	\$2,201,478	\$93,812	\$52,603
Base County Allocation	\$512,880	\$512,880	(\$0)				(\$0)
Nonoperating Revenue	\$2,044	\$2,160	(\$116)				(\$116)
County Appropriation	\$173,833	\$173,833	(\$0)				(\$0)
Excess Revenue/(Expense)	\$2,160,154	\$2,201,479	(\$41,325)	\$2,107,666	\$2,201,479	\$93,812	\$52,486

North Central Health Care
Review of 2015 Services
Lincoln County

08/20/2015

Direct Services:	2015	2015	Variance	2015	2015	Variance	Variance By Program
	July	July		July	July		
	Actual Rev	Budget Rev		Actual Exp	Budg Exp		
Outpatient Services	\$193,666	\$257,966	(\$64,300)	\$299,715	\$365,477	\$65,762	\$1,462
Lincoln Psychiatry Services	\$25,105	\$26,713	(\$1,608)	\$58,474	\$200,918	\$142,444	\$140,837
Community Treatment	\$306,751	\$381,075	(\$74,324)	\$480,034	\$498,101	\$18,067	(\$56,256)
Children's Services	\$44,898	\$38,797	\$6,101	\$137,056	\$111,917	(\$25,139)	(\$19,038)
	\$570,420	\$704,551	(\$134,131)	\$975,279	\$1,176,414	\$201,135	\$67,004
Shared Services:							
Inpatient	\$379,159	\$289,613	\$89,546	\$577,083	\$480,489	(\$96,594)	(\$7,048)
CBRF	\$79,758	\$36,027	\$43,731	\$46,510	\$75,017	\$28,507	\$72,238
Crisis	\$43,460	\$4,430	\$39,030	\$32,293	\$31,016	(\$1,277)	\$37,752
AODA Day Hospital	\$5,118	\$10,080	(\$4,962)	\$6,269	\$17,432	\$11,163	\$6,201
Protective Services	\$21,265	\$21,187	\$78	\$49,216	\$52,329	\$3,113	\$3,191
Birth To Three	\$27,604	\$54,210	(\$26,606)	\$117,020	\$106,215	(\$10,805)	(\$37,411)
Apartments	\$27,754	\$28,582	(\$828)	\$25,693	\$27,032	\$1,339	\$511
Contract Services	\$3,713	\$0	\$3,713	\$122,928	\$65,502	(\$57,426)	(\$53,713)
	\$587,831	\$444,130	\$143,701	\$977,012	\$855,031	(\$121,981)	\$21,721
Totals	\$1,158,251	\$1,148,680	\$9,571	\$1,952,291	\$2,031,445	\$79,154	\$88,725
Base County Allocation	\$487,500	\$487,500	\$0				\$0
Nonoperating Revenue	\$2,736	\$2,995	(\$259)				(\$259)
County Appropriation	\$392,270	\$392,270	(\$0)				(\$0)
Excess Revenue (Expense)	\$2,040,757	\$2,031,445	\$9,312	\$1,952,291	\$2,031,445	\$79,154	\$88,466

North Central Health Care
 Review of 2015 Services
 Marathon County

08/20/2015

	2015			2015			Variance by Program
	July	July	Variance	July	July	Variance	
Direct Services:	Actual Rev	Budget Rev	Variance	Actual Exp	Budget Exp	Variance	
Outpatient Services	\$543,218	\$738,967	(\$195,749)	\$908,274	\$1,496,338	\$588,064	\$392,315
Psychiatry Services	\$161,430	\$190,461	(\$29,031)	\$663,878	\$1,021,507	\$357,629	\$328,598
Community Treatment	\$1,746,759	\$2,071,103	(\$324,344)	\$2,582,330	\$2,746,997	\$164,667	(\$159,678)
Day Services	\$1,042,223	\$1,030,314	\$11,909	\$987,864	\$1,048,632	\$60,768	\$72,677
Clubhouse	\$181,954	\$171,411	\$10,543	\$286,442	\$261,827	(\$24,615)	(\$14,071)
Demand Transportation	\$228,012	\$255,919	(\$27,907)	\$227,507	\$255,919	\$28,412	\$505
Leased Space	\$146,084	\$139,592	\$6,492	\$151,381	\$163,940	\$12,559	\$19,051
Aquatic Services	\$382,021	\$400,108	(\$18,087)	\$402,372	\$400,108	(\$2,264)	(\$20,351)
Lakeside Recovery	\$266	\$12,167	(\$11,901)	\$30,924	\$47,448	\$16,524	\$4,623
	\$4,431,967	\$5,010,042	(\$578,075)	\$6,240,972	\$7,442,715	\$1,201,743	\$623,669
Shared Services:							
Inpatient	\$1,729,914	\$1,321,361	\$408,553	\$2,632,949	\$2,192,233	(\$440,716)	(\$32,163)
CBRF	\$363,894	\$164,372	\$199,522	\$212,204	\$342,263	\$130,059	\$329,582
Crisis Services	\$74,178	\$79,748	(\$5,570)	\$581,265	\$558,284	(\$22,981)	(\$28,551)
AODA Day Hospital	\$23,353	\$45,990	(\$22,637)	\$28,601	\$79,532	\$50,931	\$28,294
Protective Services	\$97,021	\$96,664	\$357	\$224,547	\$238,750	\$14,203	\$14,559
Birth To Three	\$409,495	\$389,041	\$20,454	\$715,820	\$758,154	\$42,334	\$62,789
Group Homes	\$1,219,224	\$1,241,585	(\$22,361)	\$1,172,568	\$1,297,946	\$125,378	\$103,017
Supported Apartments	\$1,284,846	\$1,323,181	(\$38,335)	\$1,189,431	\$1,251,429	\$61,998	\$23,663
Contracted Services	\$15,509	\$0	\$15,509	\$560,860	\$298,853	(\$262,007)	(\$246,498)
	\$5,217,434	\$4,661,942	\$559,983	\$7,318,245	\$7,017,445	(\$300,800)	\$254,692
Totals	\$9,649,401	\$9,671,984	(\$38,092)	\$13,559,217	\$14,460,160	\$900,943	\$878,360
Base County Allocation	\$1,275,042	\$1,275,458	(\$416)				(\$416)
Nonoperating Revenue	\$37,658	\$47,346	(\$9,688)				(\$9,688)
County Appropriation	\$3,595,857	\$3,465,373	\$130,484				\$130,484
Excess Revenue/(Expense)	\$14,557,958	\$14,460,160	\$82,289	\$13,559,217	\$14,460,160	\$900,943	\$998,741

HUMAN SERVICE OPERATIONS - Update for Human Services Operations Committee 09/9/15

Program	Statistics (census, admissions, discharges, referrals)	Capacity	Projects (activities/prevention work)	Moments of Excellence
<p align="center">Adult Day Services</p>	<p>Adult Day/Prevocational Antigo:</p> <p><u>36</u> Current census <u>0</u> Discharges <u>0</u> Admissions</p> <p>Adult Day Service Wausau:</p> <p><u>63</u> Current census <u>3</u> Discharges July - Aug <u>1</u> Admissions March- April</p>	<p>Antigo:</p> <p>Capacity is 42 individuals on a daily basis with current staffing patterns.</p> <p>Wausau:</p> <p>Capacity is 63 individuals on a daily basis with current staffing patterns.</p>	<p>NCHC Adult Day Service Antigo and Wausau and Prevocational Services are beginning the planning for the 2015 program holiday party for consumers within the prevocational, adult day, and residential programs. The events will be held at Dales Weston Lanes for the Wausau area programs and at the Antigo local bowling lane for the Antigo program.</p> <p>Each year the Antigo program surveys consumers and guardians to determine the level of interest to partake in the larger Wausau area holiday event but an Antigo-specific event is preferred.</p>	
<p align="center">Aquatic Services</p>	<p>July:</p> <p><u>23</u> Physical Therapy <u>977</u> Community/Family Fitt <u>142</u> Group Class</p>	<p>Aquatic Physical Therapy is currently booking out 3 weeks.</p>	<p>Pool was closed from 7/20/15-8/02/2015 for maintenance and repair.</p> <p>Over the last 90 days Aquatic Physical Therapy has been consistently back logged by 30-36 referrals. We are in the process of hiring a permanent part-time Physical Therapist.</p>	<p>Donated funds has \$10,010.07. This is raised from Kwik Trip sales, bake sale, brat-fry, towels, and swim bag sales.</p>

			Warm Water Works had a brat fry on August 19 th which raised \$604.00. Thrivent and Walmart donated the food.	
BHS/Ambulatory Detoxification	<p>June <u>79</u> Admissions <u>420</u> Patient days</p> <p>July <u>81</u> Admissions <u>428</u> Patient days</p> <p>YTD Average length of stay <u>5.5</u> days</p> <p>YTD Percent occupancy <u>87.8%</u></p>	<p>BHS Capacity: 16 with emergency access up to 20.</p> <p>Provides services for clients ages 13 and above.</p>	<p>Have successfully recruited OTR provider with focus on further development and refinement of staff and environmental approaches to enhance our approach to Trauma Informed Care. Ultimate goal is continued reduction of the use of Restraint and Seclusion.</p>	<p>Received Joint Commission Behavioral Health Accreditation. Awaiting follow-up visit for Joint Commission Hospital Accreditation.</p>
Birth to Three	<p>WAUSAU CAMPUS <u>145</u> Enrolled <u>243</u> Served YTD (Through 8/31/15)</p> <p>ANTIGO CENTER <u>12</u> Enrolled <u>24</u> Served YTD (Through 8/31/15)</p> <p>MERRILL CENTER <u>23</u> Current Enrolled <u>43</u> Served YT (Through 8/31/15)</p>	<p>Unlimited Capacity</p>	<p>-Service Coordinators are meeting regularly to review processes and practices to ensure consistency in services that are provided across all three programs. B-3 leadership developed a phone screen, billing guide that was then reviewed by the team for additional feedback. Revisions were made and the tools are being utilized. The next step is for a checklist/ process flow to be developed for an initial visit, steps following an initial visit, discharging when a referral is closed and a 3-month contact.</p>	<p>During a review, a family complimented staff on the support that has been provided. This family has a history of having a hard time trusting others.</p> <p>During a review, a family identified additional concerns for their child and indicated that they wouldn't know what to do or how to access additional resources without the support of B-3.</p>

			<p>-Primary Providers met in July and will continue to meet on a regular basis. The phone screen used by Service Coordinators was reviewed and feedback was given regarding triggers indicating the need for further evaluation. A billing guide was developed and is being utilized to ensure consistent practices related to billing.</p> <p>-Next steps from the B-3 self-assessment will be incorporated into the department action plan/dashboard.</p>	
<p>Children's Waiver/Family Support</p>	<p>LANGLADE <u>14</u> CLTS <u>5</u> Family Support</p> <p>LINCOLN <u>33</u> CLTS <u>2</u> Family Support</p>	<p>A wait list has been started in Lincoln and Langlade.</p>	<p>See Community Treatment</p>	<p>See Community Treatment</p>
<p>Clubhouse</p>	<p><u>126</u> Current Active Membership</p> <p><u>30</u> Average Daily Attendance</p> <p><u>52</u> YTD tours</p>	<p>No wait list</p> <p>Unlimited capacity</p>	<p>We will wrap up our last two Focus group sessions Sept 8 and Sept 21 (10-12 pm) at River Drive Room #1. Our first session was great and we received helpful recommendations for our PI of accessing Clubhouse.</p> <p>Laura Syring the Community Organizer for Marathon County for Wisconsin Obesity</p>	<p>Evening of Jazz October 8, 2015 - We are preparing for our annual signature event- Evening of Jazz and this year are doing things differently by putting an emphasis on local talent, local cuisine, and supporting local businesses.</p> <p>We will have a raffle and silent auction highlighting local businesses and talents. We are looking to showcase up to 10 area food vendors and showcase Wausau's local talent. We have reserved the Rothschild Pavilion for the evening of October 8th and we are ready to</p>

			<p>Prevention Initiative would like to collaborate with CCC and our younger members (18-35 yr.).</p> <p>We have a tentative date of Oct 1, 2015 5:00pm to host a dinner at Clubhouse. The goal of the gathering is to hear what young people in the community are concerned about broadly, but also maybe the potential for cooking classes.</p> <p>Clubhouse will host this fall (Oct 6, 2015 6-8 pm) NAMI Family to Family Support group. This group will meet at Clubhouse for 12 weeks.</p> <p>Our third annual Walk a Mile in our Shoes walk is scheduled for October 17 at 10 am. We plan to start at Clubhouse and walk a route ending at CCC for refreshments.</p> <p>NTC will be meeting with Clubhouse staff and members and hold sessions this fall regarding mental illness and perception with their Human Services students.</p>	have a great night!
Community Treatment	<u>Census (current served by NCHC CT):</u>	Community Treatment is	The Community Treatment Marathon Youth Team	A youth Community Treatment client in Langlade County was voted by students at the end of the

	<p>Total: <u>416</u></p> <p><u>62</u> Lincoln</p> <p><u>22</u> Youth</p> <p><u>40</u> Adult</p> <p><u>55</u> Langlade</p> <p><u>23</u> Youth</p> <p><u>32</u> Adult</p> <p><u>299</u> Marathon</p> <p><u>66</u> Youth</p> <p><u>53</u> ACT</p> <p><u>176</u> CCS Adult</p> <p><u>4</u> TCM</p> <p>Referrals:</p> <p><u>267</u> Total YTD</p> <p><u>114</u> Youth</p> <p><u>153</u> Adult</p> <p><u>49</u> Lincoln</p> <p><u>31</u> Youth</p> <p><u>18</u> Adult</p> <p><u>43</u> Langlade</p> <p><u>27</u> Youth</p> <p><u>16</u> Adult</p> <p><u>175</u> Marathon</p> <p><u>56</u> Youth</p> <p><u>119</u> Adult</p> <p>Admissions:</p> <p><u>92</u> Total YTD</p> <p><u>39</u> Youth</p> <p><u>53</u> Adult</p> <p><u>16</u> Lincoln</p> <p><u>12</u> Langlade</p>	<p>accepting youth and adult referrals in all 3 counties.</p> <p>Consumers without Medicaid are not being served in Marathon or Lincoln Counties unless they are referred by Behavioral Health Services.</p>	<p>created a Volunteer Group for youth CCS clients. This group reached out to area agencies to arrange volunteer opportunities. Community Treatment staff then assisted and supported clients in volunteering in the community. This offered these youth an opportunity to skill build while learning helpful employment and life skills. The group volunteered at the Neighbors Place, YWCA, Kennedy Park Nursing Home, Stable Hands, Rainbows End, Rib Mount State Parks and Wausau Area Events. The Rainbow's End Camp Director wrote a letter to one of the group facilitators, Gina Lenz, to thank Community Treatment, share a heartwarming story of the effect the youth group had on a camper, and to invite the group back next year. One group participant said the group "changed his life."</p> <p>Youth Services Manager, Michelle Gleason, presented to the Partnership for Youth Coalition about Community Treatment.</p>	<p>school year as the "most improved student" at Lac Du Flambeau school. At the beginning of the year, he attended infrequently and was routinely physically aggressive in school. Service Facilitator, Brook Kickhaver, attributes his success to the coming together of school, family, and NCHC to provide effective support and services.</p> <p>A Community Treatment adult client in Merrill became employed part time with the help of his Employment Specialist. He has now, after months of successful work, been offered full-time employment with excellent pay and benefits.</p>
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			Community Treatment staff attended a Merrill community night-out event where they distributed information about services of Community Treatment and NCHC.	
Crisis	<p>June</p> <p><u>Admissions</u> <u>6</u> Youth Crisis <u>101</u> Mobile Crisis Assessments <u>22</u> CBRF <u>4.2</u> CBRF ave. census</p> <p><u>Mobile Crisis Diversions</u> <u>77</u> Total <u>70</u> Adults <u>7</u> Minors</p> <p>July</p> <p><u>Admissions</u> <u>5</u> Youth Crisis <u>138</u> Mobile Crisis Assessments <u>25</u> CBRF <u>3.2</u> CBRF average census</p> <p><u>Mobile Crisis Diversions</u> <u>87</u> Total <u>76</u> Adults <u>11</u> Minors</p>	<p><u>Occupancy</u> <u>52.5</u> CBRF <u>20</u> Youth Crisis</p> <p><u>Occupancy</u> <u>39.5</u> CBRF <u>16.1</u> Youth Crisis</p> <p>July Mobile Crisis statistics include 20 episodes of services provided in the county jails. This is a new statistic that will be reflected in future reports.</p>	<p>Mobile Crisis Professionals have been hired and are completing training to provide 24/7 Mobile Crisis services in all three counties effective September 2015. This hiring also provides resources needed for increased services in the jails.</p> <p>6 Bed Medically Monitored Treatment opened in late July. The program is located in the Crisis CBRF which has been expanded to 12 beds. This is an AODA 21 day treatment program for those who need a higher level of care than Day Treatment.</p>	<p>Crisis CBRF program has been entirely revamped to increase focus on wellness and development of enhanced coping skills. This work is done in conjunction with the programming available to the MMT clients and provides additional alternatives for the Crisis clients.</p>
Outpatient (AODA/MH/Psychiatry)	<p>June, 2015</p> <p><u>MH admissions</u> <u>63</u> Wausau <u>15</u> Antigo <u>21</u> Merrill <u>4</u> Tomahawk</p>	<p>3 individuals on wait list for Substance Abuse Day Treatment Program as of 8/21/15. All 3 have start dates established.</p>	<p>6 Outpatient Process Improvement teams to be aligned with the department dashboard with each outpatient employee being a member of one team</p>	<p>NCHC new OWI assessor starts September 21, 2015.</p> <p>State of Wisconsin STAR-QI project in Outpatient Services:</p>

	<p><u>AODA admissions</u></p> <p><u>34</u> Wausau <u>17</u> Antigo <u>9</u> Merrill <u>3</u> Tomahawk</p> <p><u>Psychiatry Evaluations</u></p> <p><u>28</u> Wausau <u>7</u> Antigo <u>6</u> Merrill <u>1</u> Tomahawk</p> <p><u>OWI Assessments</u></p> <p><u>43</u> Wausau <u>3</u> Antigo <u>11</u> Merrill/Tomahawk</p> <p><u>AODA Day Treatment</u></p> <p>8 Wausau</p>		<ul style="list-style-type: none"> • Clinical team-(OWI recidivism) Obtaining baseline data for access to complete OWI assessments. Implementing practice management strategies to ensure individuals scheduled for a pretrial in Marathon County are scheduled for OWI assessments before pretrial date. • People Team- Employee Partnership Action Plan being finalized to include measurable solutions. • Service Team- Client satisfaction- Developing scripting in delivering surveys to clients. Obtaining OP employee feedback on improving the survey tool • Community Team Assess access to service – monitor access to service considering vacant therapist positions and add OWI assessment access monitoring. • Finance Team Documentation completion audits and timely billing. • No Show Team – 	<p>On June 12, 2015, Tom Dowe and Aekta Dassow attended and presented their project at the State of Wisconsin Strengthening Treatment Access and Retention Quality Improvement (STAR-QI) conference that was held at the Grand Lodge in Rothschild, WI. The Outpatient No Show Process Improvement Team which currently consist of Tom Dowe, Karen Klos, Michelle Zindorf, Tina Gajewski, Karen Lyon, Judy Privette and Aekta Dassow have been working diligently on the project of reducing no shows for initial assessment appointments. In September 2014, the team looked at baseline data showing a no show rate for initial assessments of 28.68%. As the team worked through the PDCA process improvement tool, a consensus of sending a welcome letter, program brochure and the business card of the clinician that the perspective client was scheduled to see. After collecting data through the next nine months, the data shows a decrease in initial assessment no shows to 14.96%. This process was adopted for Outpatient Services. There were multiple speakers and break-out sessions involving other organizations from across the state focusing on excellent customer service, ensuring clients stay in services across the continuum of care and decreasing no show appointment rates. Through all presentations including ours, great ideas were captured and brought back to North Central Health Care for possible future process improvement ideas.</p>
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			<p>Establishing strategies to decrease no shows for therapy and medication appointments. Revising missed appointment policy. Collaborating with Probation & Parole in discussions and development of strategies for client population in on Probation & Parole.</p>	
<p>Pre-Vocational Services</p>	<p><u>118</u> Prevocational Service's Wausau current census</p> <p><u>3</u> Discharges due to successfully obtaining community employment</p>	<p>Maximum consumer census fluctuates according to multiple factors of current behavioral levels, one on one consumer requirements, and production needs. Our current contractual agreement requires a 1 to 15 staff to consumer ratio besides any one to one rated consumers. We are currently operating within our contractual agreements.</p>	<p>Prevocational Services, Adult Day Services, and Residential continue to work together to improve continuum of care between the service strings for consumers receiving services in multiple programs. A workgroup meets every Monday afternoon in goal development between programs for consumer base to increase achievement rate.</p> <p>Prevocational Services is currently working on a pilot through a grant obtained by Wausau West High School. The project works to develop adaptive equipment for individuals with physical limitation to perform task in a work environment that without specialized</p>	<p>Prevocational Services sustained 3 discharges since July. These discharges were positive as they were within the NCHC Prevocational services line. They have been long term participants who completed the curriculum which resulted in them obtaining competitive community employment. Prior to the enhanced service they would not have even considered community employment an obtainable option. Two individuals received part time employment with local Wagner Shell gas stations and one at Pick and Save all paying above the minimum wage.</p>

			<p>accommodation the individual would not be able to perform. Wausau West obtained the grant and is part of their educational curriculum.</p> <p>The project will take place over the first and second semesters of the 2015/2016 school year. Students from Wausau West engineering program will be working on developing and building specialized adaptive equipment for two separate jobs currently performed within the prevocational setting with selected physically limited individuals through a random selection process.</p>	
<p>Residential Services</p>	<p>Current Census: <u>30</u> CBRF _____ Apts. _____ Total</p> <p>Hillcrest CBRF <u>5</u> Current <u>7</u> Capacity</p> <p>Bellwood CBRF <u>5</u> Current <u>6</u> Capacity</p> <p>Heather CBRF: <u>7</u> Current <u>7</u> Capacity</p>	<p><u>Capacity:</u> CBRF: 33 Apts.: Varies</p>	<p>Residential Services planned and held a job fair at the Jelinek supportive apartment location in Weston on Thursday Aug 27th. The goal was to recruit and fill the 14 open residential care assistance positions. Residential Services has been running with over 14 open positions for the past several months. There has been a staffing shortage within this field and recently 3 local homes closed; one fully to not being able to find staff, and</p>	<p>A consumer within Residential Services has had increasing behavioral outbursts and aggressions over the past several months that recently increased to a level that resulted in 2 crisis stays and two hospital stays. This consumer was not able to continue to maintain his placement within the NCHC Bellewood CBRF due to the impact of his actions to other members of the home. CCCW tried to find placement that was more appropriate but was unable to do so with the current housing shortage and intensity of the individual's behaviors and providers willing to serve. NCHC and CCCW collaborated to develop a one on one staffing pattern within the Fulton Street staff apartment to attempt stabilization though CSL Supports. Due to the staffing shortage this has taken the staff support</p>

	<p><u>Chadwick CBRF:</u> <u>7</u> Current <u>7</u> Capacity</p> <p><u>Bissell CBRF:</u> <u>6</u> Current <u>6</u> Capacity</p> <p><u>Jelinek Apt:</u> <u>20</u> Current <u>20</u> Capacity <u>0</u> Wait List</p> <p><u>Fulton Apt:</u> <u>9</u> Current <u>9</u> Capacity</p> <p><u>River View Apt:</u> <u>11</u> Current Varies Capacity <u>3</u> Wait List</p> <p><u>Forest Jackson</u> 16 Current Varies Capacity</p>		<p>another partially due to staffing shortages in conjunction to cuts in rate. NCHC has also been dealing with staffing challenges. The job fair was successful with obtaining 9 offers to hire.</p> <p>Due to the local home closures residential services has received over 10 referrals in the past three weeks.</p>	<p>from multiple programs within NCHC that know and have successful behavioral outcomes with this participant. ADS staff, Prevocational Staff and Residential Staff from the consumer's original home have pulled together resources and have been managing much improved outcomes. This stabilization will take a few months but overall behavioral outbursts have been reduced by 50 percent. The willingness of staff to assist to ensure that there is not just coverage but appropriate coverage to result in positive outcomes with a proactive therapeutic approach is in place has been outstanding. This has resulted in stabilized sleep patterns which are assisting in the reduced outbursts.</p>
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Key: AODA = Alcohol & Other Drug Abuse; BHS = Behavioral Health Services; CSP = Community Support Program; CCS = Comprehensive Community Services; OP = Outpatient; MH = Mental Health