

## 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 **10:30 a.m.**, on **Friday, February 12<sup>th</sup>**, 2016.

*(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 12/11/15 meeting
    - 2) Financial update
3. Human Services Report
4. Crisis Process Improvement update (Laura)
5. Updates:
  - a. Psychiatry update (Gary)
  - b. Aquatic update (Gary)
  - c. Early childhood/intervention services (Janelle Hintz)
6. Update: Services to the criminal justice system
7. Update: Leadership turnover
8. Future items for committee consideration
9. 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 02/05/16                      TIME 4:00 p.m.

VIA: X FAX X MAIL

BY: /s/ Debbie Osowski

#### THIS NOTICE POSTED AT

NORTH CENTRAL HEALTH CARE

DATE 02-05-16    Time 4:00 p.m.

By Debbie Osowski

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**

**December 11, 2015**

**8:00 a.m.**

**NCHC – Wausau Campus**

Present:

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

Also Present: Gary Bezucha, Brenda Glodowski, Michael Loy, Debbie Osowski

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

Consent Agenda

- **Motion**/second, Haney/Bergstrom, to approve the consent agenda, which includes the minutes of the 09/09/15 meeting and the financial report. Motion carried.

Human Services Operations Report

- Aquatic Services continues to search for a physical therapist.
- Ambulatory Detox had not been open due to lack of nursing staff. However, on 11/1/15 it was reopened utilizing contract RN staff. In this way, we are able to serve individuals in ambulatory detox and avoid using the already crowded inpatient unit for detox.
- An independent panel has been created to examine our crisis services. Panel is chaired by Laura Scudiere and includes representation from hospitals, law enforcement, and the private counseling industry. Progress is being made and we anticipate wrap up in January with opportunities in crisis services.
  - Suggestion was made to include representative(s) from the judicial system.
- Laura Scudiere will provide an update at the next meeting as the new Human Services Operations Executive.
- There are a series of process improvement teams working in outpatient services on OWI recidivism, employee partnership, client satisfaction, access to service, and finance.

Updates

- Psychiatry
  - An onsite psychiatry candidate who visited in October did not accept our offer. Recruitment continues in psychiatry.
  - Psychiatry Residency program application was filed this week with the required 12 stipends. Hopeful for a site visit early 2016. Aspirus and Marshfield Clinic have declined to participate at this time.
- Aquatic
  - Marathon County board funded the next phase of the pool study which will be to review the figures of a new facility and the decommissioning of the old facility.
- Early childhood/intervention services
  - Discussions are taking place on childhood trauma and would like to include on the agenda in early 2016 for an update.

- Working collaboratively with Marathon County Social Services to develop a crisis model that could better serve kids for longer durations than the 24-hour beds on campus.
- Could potentially expand to Langlade and Lincoln counties.

#### Services to the criminal justice system

- Continuing to provide enhanced services to Marathon County: 40 hours/week of forensic therapy plus 8 hours tele-psychiatry to the jail.
- Will continue to provide as regular services in 2016.
- Langlade and Lincoln Counties have declined our offer to provide this type of service in their counties, however, Langlade County wants to leave options open for possible expansion next year.
- Expanded 24/7 crisis services to all three counties. Langlade County extremely happy. No negative feedback from Lincoln County.
- At the Joint meeting of Health & Human Services and Public Safety it was determined to move the contract for tele-psychiatry to more of a follow-up with probation and parole; Marathon County has added a case manager to develop a plan upon discharge.
- Judge raised issues that they were looking for a 24-hour response to schedule an assessment within 7 days and 21 days for treatment. We can and do return calls within 24 hours, however due to staff vacancies on the Wausau Campus we are not able to provide an assessment within 7 days unless we do not serve a large portion of people who are not part of the criminal justice system. The Board feels it is not appropriate to underserve one population in order to serve another but need to be diligently working to fill staff vacancies to meet all the needs.

#### 2016 Committee meeting schedule

- Composition of the committee will probably not change in 2016.
- Will continue to look for a better meeting schedule.

#### Future items for Committee consideration

- Update on Marathon County Task Force study
- Crisis panel update
- Turnover of executives i.e. roles and responsibilities
- Life Report review of findings, challenges, and opportunities for NCHC

The Committee also wanted to express their sincere thanks to Toni Simonson for her years of service, dedication, and leadership in the shaping of human services and for all of her accomplishments in the 51.42 system. Toni is wished all the best in her endeavors.

**Motion**/second, Rusch/Matucheski, to adjourn the meeting at 9:00 a.m. Motion carried.

*dko*

North Central Health Care  
Review of 2015 Services  
Langlade County  
Preliminary

01/23/2016

	2015 December Actual Rev	2015 December Budg Rev	Variance	2015 December Actual Exp	2015 December Budg Exp	Variance	Variance by Program
<b>Direct Services:</b>							
Outpatient Services	\$368,702	\$409,947	(\$41,245)	\$551,113	\$678,198	\$127,085	\$85,840
Psychiatry Services	\$40,732	\$25,350	\$15,382	\$225,728	\$220,436	(\$5,292)	\$10,090
Community Treatment	\$602,185	\$660,506	(\$58,321)	\$752,173	\$808,525	\$56,352	(\$1,969)
Day Services	\$508,047	\$566,152	(\$58,105)	\$436,118	\$502,420	\$66,302	\$8,197
Children's Services	\$72,456	\$79,672	(\$7,216)	\$216,956	\$163,081	(\$53,875)	(\$61,091)
	\$1,592,122	\$1,741,627	(\$149,505)	\$2,182,088	\$2,372,660	\$190,572	\$41,067
<b>Shared Services:</b>							
Inpatient	\$473,277	\$341,330	\$131,947	\$739,498	\$566,291	(\$173,207)	(\$41,260)
CBRF	\$93,141	\$42,460	\$50,681	\$65,380	\$88,412	\$23,032	\$73,713
Crisis	\$6,204	\$7,595	(\$1,391)	\$58,948	\$53,170	(\$5,778)	(\$7,169)
AODA Day Hospital	\$8,274	\$11,880	(\$3,606)	\$9,386	\$20,544	\$11,158	\$7,552
Protective Services	\$25,004	\$24,970	\$34	\$59,123	\$61,673	\$2,550	\$2,584
Birth To Three	\$61,019	\$130,418	(\$69,399)	\$113,221	\$243,614	\$130,393	\$60,994
Group Homes	\$132,166	\$135,668	(\$3,502)	\$130,671	\$141,827	\$11,156	\$7,654
Supported Apartments	\$159,994	\$157,091	\$2,903	\$148,961	\$148,572	(\$389)	\$2,514
Contract Services	\$6,033	\$0	\$6,033	\$160,029	\$77,199	(\$82,830)	(\$76,797)
	\$965,112	\$851,412	\$113,700	\$1,485,217	\$1,401,302	(\$83,915)	\$29,785
Totals	\$2,557,234	\$2,593,039	(\$35,805)	\$3,667,305	\$3,773,962	\$106,657	\$70,852
Base County Allocation	\$879,223	\$879,223	\$0				\$0
Nonoperating Revenue	\$3,771	\$3,702	\$69				\$69
County Appropriation	\$298,000	\$298,000	\$0				\$0
Excess Revenue/(Expense)	\$3,738,228	\$3,773,964	(\$35,736)	\$3,667,305	\$3,773,964	\$106,657	\$70,920

North Central Health Care  
Review of 2015 Services  
Lincoln County  
**Preliminary**

01/23/2016

	2015 December Actual Rev	2015 December Budget Rev	Variance	2015 December Actual Exp	2015 December Budg Exp	Variance	Variance By Program
<b>Direct Services:</b>							
Outpatient Services	\$335,291	\$442,228	(\$106,937)	\$476,176	\$626,532	\$150,356	\$43,419
Lincoln Psychiatry Services	\$50,040	\$45,793	\$4,247	\$349,474	\$344,431	(\$5,043)	(\$796)
Community Treatment	\$660,080	\$653,271	\$6,809	\$807,356	\$853,888	\$46,532	\$53,341
Children's Services	\$77,545	\$66,509	\$11,036	\$175,365	\$191,858	\$16,493	\$27,529
	\$1,122,956	\$1,207,801	(\$84,845)	\$1,808,371	\$2,016,709	\$208,338	\$123,493
<b>Shared Services:</b>							
Inpatient	\$688,399	\$496,480	\$191,919	\$1,075,634	\$823,696	(\$251,938)	(\$60,019)
CBRF	\$135,478	\$61,760	\$73,718	\$95,098	\$128,600	\$33,502	\$107,220
Crisis	\$6,204	\$7,595	(\$1,391)	\$58,948	\$53,170	(\$5,778)	(\$7,169)
AODA Day Hospital	\$12,034	\$17,280	(\$5,246)	\$13,652	\$29,883	\$16,231	\$10,985
Protective Services	\$36,369	\$36,320	\$49	\$85,997	\$89,706	\$3,709	\$3,758
Birth To Three	\$111,495	\$92,932	\$18,563	\$206,880	\$182,083	(\$24,797)	(\$6,234)
Apartments	\$49,904	\$48,998	\$906	\$46,462	\$46,341	(\$121)	\$785
Contract Services	\$8,547	\$0	\$8,547	\$232,769	\$112,289	(\$120,480)	(\$111,933)
	\$1,048,430	\$761,365	\$287,065	\$1,815,440	\$1,465,768	(\$349,672)	(\$62,607)
Totals	\$2,171,386	\$1,969,166	\$202,220	\$3,623,811	\$3,482,477	(\$141,334)	\$60,886
Base County Allocation	\$835,714	\$835,714	\$0				\$0
Nonoperating Revenue	\$5,046	\$5,134	(\$88)				(\$88)
County Appropriation	\$672,463	\$672,463	\$0				\$0
Excess Revenue (Expense)	\$3,684,609	\$3,482,477	\$202,132	\$3,623,811	\$3,482,477	(\$141,334)	\$60,798

North Central Health Care  
Review of 2015 Services  
Marathon County  
**Preliminary**

01/23/2016

Direct Services:	2015	2015	Variance	2015	2015	Variance	Variance by Program
	December Actual Rev	December Budget Rev		December Actual Exp	December Budget Exp		
Outpatient Services	\$879,424	\$1,266,800	(\$387,376)	\$1,598,891	\$2,565,150	\$966,259	\$578,883
Psychiatry Services	\$288,439	\$326,505	(\$38,066)	\$1,402,238	\$1,751,155	\$348,917	\$310,851
Community Treatment	\$3,367,037	\$3,550,463	(\$183,426)	\$4,721,987	\$4,709,137	(\$12,850)	(\$196,276)
Day Services	\$1,788,137	\$1,766,253	\$21,884	\$1,728,987	\$1,797,655	\$68,668	\$90,552
Clubhouse	\$293,948	\$293,847	\$101	\$483,026	\$448,847	(\$34,179)	(\$34,078)
Demand Transportation	\$399,217	\$438,718	(\$39,501)	\$398,520	\$438,718	\$40,198	\$697
Leased Space	\$227,344	\$239,300	(\$11,956)	\$258,899	\$281,040	\$22,141	\$10,185
Aquatic Services	\$682,001	\$685,900	(\$3,899)	\$697,069	\$685,900	(\$11,169)	(\$15,068)
Lakeside Recovery	\$37,484	\$73,000	(\$35,516)	\$69,021	\$284,685	\$215,664	\$180,148
	\$7,963,031	\$8,640,786	(\$677,755)	\$11,358,638	\$12,962,287	\$1,603,649	\$925,894
<b>Shared Services:</b>							
Inpatient	\$3,140,815	\$2,265,190	\$875,625	\$4,907,578	\$3,758,114	(\$1,149,464)	(\$273,839)
CBRF	\$618,114	\$281,780	\$336,334	\$433,885	\$586,737	\$152,852	\$489,186
Crisis Services	\$111,680	\$136,710	(\$25,030)	\$1,061,068	\$957,058	(\$104,010)	(\$129,040)
AODA Day Hospital	\$54,907	\$78,840	(\$23,933)	\$62,286	\$136,341	\$74,055	\$50,122
Protective Services	\$165,935	\$165,710	\$225	\$392,363	\$409,285	\$16,922	\$17,147
Birth To Three	\$672,161	\$666,927	\$5,234	\$1,247,208	\$1,299,693	\$52,485	\$57,719
Group Homes	\$2,073,489	\$2,128,432	(\$54,943)	\$2,050,027	\$2,225,051	\$175,024	\$120,081
Supported Apartments	\$2,310,237	\$2,268,311	\$41,926	\$2,150,926	\$2,145,307	(\$5,619)	\$36,307
Contracted Services	\$35,696	\$0	\$35,696	\$1,062,009	\$512,319	(\$549,690)	(\$513,994)
	\$9,183,034	\$7,991,900	\$1,155,438	\$13,367,350	\$12,029,905	(\$1,337,445)	(\$146,311)
Totals	\$17,146,065	\$16,632,686	\$477,683	\$24,725,988	\$24,992,192	\$266,204	\$779,583
Base County Allocation	\$2,186,499	\$2,186,499	\$0				\$0
Nonoperating Revenue	\$69,467	\$81,165	(\$11,698)				(\$11,698)
County Appropriation	\$6,327,903	\$6,091,842	\$236,061				\$236,061
Excess Revenue/(Expense)	\$25,729,934	\$24,992,192	\$702,046	\$24,725,988	\$24,992,192	\$266,204	\$1,003,946

## HUMAN SERVICE OPERATIONS - Update for Human Services Operations Committee 2/12/16

Program	Statistics (census, admissions, discharges, referrals)	Capacity	Projects (activities/prevention work)	Moments of Excellence
<b>Adult Day Services</b>	<p><b>Adult Day/Prevocational Antigo:</b></p> <p><u>36</u> Current census <u>0</u> Discharges <u>0</u> Admissions</p> <p><b>Adult Day Service Wausau:</b></p> <p><u>64</u> Current census <u>0</u> Discharges <u>1</u> Admissions</p>	<p><b>Antigo:</b></p> <p>Capacity is 42 individuals on a daily basis with current staffing patterns.</p> <p><b>Wausau:</b></p> <p>Capacity is 63 individuals on a daily basis with current staffing patterns.</p>	<p>ADS/Prevoc is currently focusing on aligning with state guidelines in qualifying consumers for prevocational programs, making adjustments to programming activities for consumers by increasing program ADS hours, and decreasing vocational time for individuals who currently do not have the required integrated outcome goal.</p> <p>Outcome goals are defined by the consumer's individual choice to work.</p> <p>This is a culture change that requires collaboration with care teams to encourage change from the guardian perspective.</p> <p>In addition, this change is resulting in adaption to program functions and staffing patterns. We anticipate accommodating changes without increasing FTEs and with a positive outcome fiscally.</p>	
<b>Aquatic Services</b>	<p><b>November:</b></p> <p><u>61</u> Physical Therapy <u>1829</u> Community/Family Fitt <u>205</u> Group Class</p> <p><b>December:</b></p> <p><u>44</u> Physical Therapy <u>1937</u> Community/Family Fitt <u>215</u> Group Class</p>	<p>Aquatic Physical Therapy is currently booking out 2 weeks.</p>		

<p align="center"><b>BHS/Ambulatory Detoxification</b></p>	<p><b>November:</b> <u>73</u> Admissions <u>455</u> Patient days</p> <p><b>December:</b> <u>64</u> Admissions <u>497</u> Patient days</p> <p><b>YTD Average length of stay</b> <u>5.5</u> days</p> <p><b>YTD Percent occupancy</b> <u>89.8%</u> October</p>	<p>BHS Capacity: 16 with emergency access up to 20.</p> <p>Provides services for clients ages 13 and above.</p>	<p>New Interim Behavioral Health Services Director, Mark Lancet began his role as of 12/30/16.</p> <p>New, revised daily programming initiated on 1/25/16, thereby meeting regulatory standards, and enhancing quality of care offerings for patients.</p>	
<p align="center"><b>Birth to Three</b></p>	<p><b>MARATHON:</b> <u>150</u> Currently Enrolled <u>150</u> Served YTD (Through 1/31/16)</p> <p><b>LANGLADE</b> <u>14</u> Currently Enrolled <u>14</u> Served YTD (Through 1/31/16)</p> <p><b>LINCOLN</b> <u>24</u> Currently Enrolled <u>24</u> Served YTD (Through 1/31/16)</p>	<p>Unlimited Capacity</p>	<p>A new Occupational Therapist and Speech and Language Therapist started in January, so we are currently fully staffed.</p> <p>Team is working on a process improvement project related to the child outcomes. The Office of Special Education Programs requires Birth-3 Programs to collect data regarding child outcomes in the area of social emotional development, acquisition and use of knowledge and skills and taking appropriate action to meet needs. Children are rated in these areas when entering and exiting the Birth-3 services. This data is then used to evaluate the effectiveness of services. The team identified the rating process as an area of improvement. The initial action step that has been implemented is completing the rating process as a team during team meetings. Specific tools recommended by DHS are</p>	<p>Client satisfaction for January was 93.8% ranking our program as a 9 or 10 based on 16 surveys being returned. Below are some of the verbatim comments from the returned surveys.</p> <ul style="list-style-type: none"> <li>As our daughter is nearing her third birthday, we just wish we could have the security of the Birth to 3 knowledge to continue longer!</li> <li>B-3 has always worked well to make appointment times work well Xxxx loves them and I always see improvements!</li> <li>Wonderful program! Highly effective. The leaders are phenomenal; Debbie and Jill are extremely personable, professional, smart, kind, caring, and engaging. I am grateful for their expertise and ability to help my child continue to develop their speech and communication. Thank you!</li> </ul>



			<p>used when completing the process. The team is exploring the possibility of using an integrated report to better provide evidence for the ratings and have the process be more objective.</p>	
<p align="center"><b>Community Corner Clubhouse (CCC)</b></p>	<p><u>126</u> Current Active Membership</p> <p><u>30</u> Average Daily Attendance</p> <p><u>60</u> YTD tours</p>	<p>No wait list</p> <p>Unlimited capacity</p>	<p>Some very exciting things have been happening for CCC. We revised our application, tour and orientation process. This seems like a small thing but it actually involves many steps. We have been doing “dry runs” of the new system the last two weeks and have a few areas to tweak- but overall things are going great.</p> <p>This change was in response to 2015 Focus Group sessions where stakeholders gave us feedback on our intake process and potential barriers to access of Clubhouse services. Our goal is to increase access to service and be the open door to mental health services.</p> <p>Our board is busy preparing for a busy year and we have new positons (chair,-co-chair, secretary and treasurer.) These positions will help both guide our board but also support Clubhouse operations.</p>	<p>CCC will be collaborating with several community groups in the next month.</p> <p>We are participating in the Hygiene for the Homeless Coalition- this is in collaboration with Neighbor’s Place and 5 other Wausau agencies.</p> <p>The basic needs drive will take place from Feb 22- March 4. This basic needs drive will help many members obtain items to help offset hygiene costs.</p> <p>CCC was asked to present to Wausau West freshman class regarding mental health stigma. We will meet with over 300 freshmen in late Spring.</p> <p>Clubhouse was also asked to present to the Unitarian Universalist (UU’s) church 2/21/16 on the Clubhouse model- they also plan to do a basic needs drive for us!</p> <p>CCC is participating in CIP- Crisis Intervention Prevision Training, to area Criminal Justice Programs. We are both on the agenda to do presentations to area law enforcement and on the steering committee to help organize the training that will take place later this spring. Excellent collaboration!!</p> <p>CCC met this past month with Marathon County Public Health Nurses to discuss collaborations and to share program information. They plan to come back an additional time to present to the larger Clubhouse.</p> <p>Our outreach efforts of the past year are beginning to reveal themselves. Increased community awareness and partnerships are what will carry us through and demonstrate our effectiveness.</p>

				<p>We are becoming better known within our community and are connecting with people who need our services.</p> <p><b>This is going to be an exciting year for us!</b></p>
<p><b>Community Treatment/Children's Waiver/Family Support</b></p>	<p><b><u>Census (current served by NCHC CT):</u></b></p> <p><b>Total:</b>    <u>471</u></p> <p>    <u>92</u>    <b>Lincoln</b>      <u>55</u>    Youth      <u>37</u>    Adult</p> <p>    <u>72</u>    <b>Langlade</b>      <u>38</u>    Youth      <u>34</u>    Adult</p> <p>    <u>307</u>    <b>Marathon</b>      <u>63</u>    Youth      <u>52</u>    ACT      <u>188</u>    CCS Adult      <u>4</u>    TCM</p> <p><b><u>Referrals (2015 summary):</u></b></p> <p><u>380</u>    <b>Total YTD</b>  <u>147</u>    Youth  <u>200</u>    Adult</p> <p>    <u>77</u>    <b>Lincoln</b>      <u>50</u>    Youth      <u>27</u>    Adult</p> <p>    <u>77</u>    <b>Langlade</b>      <u>42</u>    Youth      <u>35</u>    Adult</p> <p>    <u>226</u>    <b>Marathon</b>      <u>91</u>    Youth      <u>178</u>    Adult</p>	<p>Community Treatment is at capacity for youth services in all 3 counties and a solution is being sought so that referrals can be accommodated.</p> <p>Consumers without Medicaid are not being served in Marathon or Lincoln Counties unless they are referred by Behavioral Health Services.</p>	<p>Marathon Adult Services have begun offering 2 new groups – Healthy Mind and Body and Wellness Management and Recovery.</p> <p>Lincoln and Langlade Youth Services have each begun a new social skills development group.</p>	<p>A Community Treatment Consumer asked to share his story in our newsletter:</p> <p>“A year ago today I felt hopeless, terrified, depressed, and furious. I certainly didn't think I'd be capable of holding a job, feel moments of joy, or engage in a meaningful time with the people in my life. I wasn't sure I was going to make it from one day to the next without my situation getting even worse.</p> <p>Since that time I've met staff through the Community Treatment program whose time and hard work have made my life for the better. Every employee I've interacted with has been helpful, kind, and driven to achieve what was in my best interest. A special thanks to Sallie, Maureen, Gail, Paula, Trisha, Cara, Tanya..... and on.</p> <p>Another thing that has helped me immensely is the huge support by my Mom and Step-Father. I've put them through a lot of grief and taken up a lot of their time. I'm lucky to have them and other family members, my siblings mainly, show their support.</p> <p>On a final note, being able to see an experienced, personable, and very knowledgeable psychiatrist and psychologist has been extremely beneficial. Thank you to my wonderful case manager for helping me get these also exceptional professionals into my support network.”</p>

	<p><b><u>Admissions (2015 summary):</u></b></p> <p><u>156</u> Total YTD  <u>44</u> Youth  <u>75</u> Adult</p> <p><u>31</u> Lincoln  <u>28</u> Langlade  <u>97</u> Marathon</p>			
<b>Crisis</b>	<p><b>November</b></p> <p><b><u>Admissions</u></b>  <u>12</u> Youth Crisis  <u>151</u> Mobile Crisis Assessments  <u>20</u> CBRF  <u>4.2</u> CBRF ave. census</p> <p><b><u>Mobile Crisis Diversions</u></b>  <u>129</u> Total  <u>93</u> Adults  <u>36</u> Minors</p> <p><b>December</b></p> <p><b><u>Admissions</u></b>  <u>14</u> Youth Crisis  <u>1</u> Mobile Crisis Assessments  <u>20</u> CBRF  <u>4.4</u> CBRF average census</p> <p><b><u>Mobile Crisis Diversions</u></b>  <u>123</u> Total  <u>86</u> Adults  <u>37</u> Minors</p>	<p><u>Occupancy</u>  <u>69.4%</u> CBRF  <u>40%</u> Youth Crisis</p> <p><u>Occupancy</u>  <u>72%</u> CBRF  <u>45.2%</u> Youth Crisis</p> <p>Mobile Crisis statistics include 41 episodes of services provided in the county jails. This is a new statistic that will be reflected in future reports.</p>	<p>Increased emphasis in priority placed upon customer service both internally and externally.</p> <p>Currently in process of onboarding additional staff to fill vacancies. At this time we have added three full-time crisis workers with more to come.</p>	
<b>Outpatient (AODA/MH/Psychiatry)</b>	<b>December 2015</b>	12 individuals on wait list for	3 Outpatient Process Improvement teams will	The Outpatient Department has filled two open positions. Todd Hameau is a Substance Abuse

	<p><b><u>MH admissions</u></b></p> <p><u>66</u> Wausau  <u>16</u> Antigo  <u>21</u> Merrill  <u>2</u> Tomahawk</p> <p><b><u>AODA admissions</u></b></p> <p><u>59</u> Wausau  <u>18</u> Antigo  <u>9</u> Merrill  <u>9</u> Tomahawk</p> <p><b><u>Psychiatry Evaluations</u></b></p> <p><u>36</u> Wausau  <u>4</u> Antigo  <u>6</u> Merrill  <u>2</u> Tomahawk</p> <p><b><u>OWI Assessments</u></b></p> <p><u>63</u> Wausau  <u>5</u> Antigo  <u>11</u> Merrill/Tomahawk</p> <p><b><u>AODA Day Treatment</u></b></p> <p><u>10</u> Wausau</p> <p><b>December, 2015</b></p> <p><b><u>MH admissions</u></b></p> <p><u>71</u> Wausau  <u>21</u> Antigo  <u>19</u> Merrill  <u>2</u> Tomahawk</p> <p><b><u>AODA admissions</u></b></p> <p><u>52</u> Wausau  <u>8</u> Antigo  <u>17</u> Merrill  <u>12</u> Tomahawk</p>	<p>Substance Abuse Day Treatment Program as of 10/26/15. Seven individuals have start dates established.</p>	<p>continue. These teams are aligned with the department's dashboard and have a variety of Outpatient employees as members.</p> <ul style="list-style-type: none"> <li>• Client satisfaction- Aligning team with STAR-QI project. Will be identifying employee key phrases, department key opportunity, assess possible modifications to make the survey more user friendly, and discuss leader rounding.</li> <li>• Access to Service – Monitors access to service considering vacant therapist positions and add OWI assessment access monitoring. We collect data from a client OWI Assessment to their first offered DSP Therapy Appointment.</li> <li>• Employee Partnership - Implemented solution focused rapid cycle pilot at 3 Outpatient locations. The outcomes for the pilots have gone well and the pilots were adopted. The team will continue to focus on identifying long-term and short-term goals for improving engagement.</li> </ul>	<p>Counselor who has joined the Wausau Campus team. Janis Southworth is a MH and Substance Abuse Therapist who has joined our Merrill Center office. The department has started the interview process for two medical assistants, another therapist and a director.</p>
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**Psychiatry Evaluations**

45 Wausau  
2 Antigo  
10 Merrill  
3 Tomahawk

**OWI Assessments**

46 Wausau  
9 Antigo  
13 Merrill/Tomahawk

**AODA Day Treatment**

16 Wausau

**December, 2015**

**MH admissions**

58 Wausau  
17 Antigo  
17 Merrill  
5 Tomahawk

**AODA admissions**

57 Wausau  
8 Antigo  
21 Merrill  
9 Tomahawk

**Psychiatry Evaluations**

47 Wausau  
6 Antigo  
1 Merrill  
3 Tomahawk

**OWI Assessments**

75 Wausau  
5 Antigo  
14 Merrill/Tomahawk

**AODA Day Treatment**

10 Wausau

<p align="center"><b>Pre-Vocational Services</b></p>	<p><u>109</u> Prevocational Service's Wausau current census</p> <p><u>4</u> Discharges</p> <p><u>5</u> SEP Long Term Support (Individuals hired for competitive wages in community jobs under long term support)</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 Wausau has been working with the Wausau West engineering department on developing adaptive equipment to assist consumers within the vocational training center on performing higher risk injury jobs safely minimizing the risk for repetitive motion and pressure point injuries. This is being funded through a grant obtained by the school's engineering department and supported by our manufacturing suppliers group as an education study project.</p>	<p>NCHC Prevocational Program has a community skill building program in which we volunteer at other non-profit agencies. This program has assisted many individuals with obtaining community employment that otherwise may not have succeeded. This also helps our other non-profit community resources meet the needs of our community as a whole.</p> <p>We currently have 13 individuals who volunteer at the Salvation Army. Current these consumers have put in between 157 hours to 584 hours each in community service while developing relationships and helping others as well as building work skills that assist in becoming more productive in self-supporting.</p> <p>This is a big accomplishment for some of them. Also the Salvation Army is still considering giving the consumers with over 400 hours a shirt like they have done in the past. If my count is correct that would be 6 or 7 off the list.</p>
<p align="center"><b>Residential Services</b></p>	<p><b>Current Census:</b>  <u>32</u> CBRF  <u>59</u> Apts.  <u>92</u> Total</p> <p><b>Hillcrest CBRF</b>  <u>7</u> Current  <u>7</u> Capacity</p> <p><b>Bellwood CBRF</b>  <u>5</u> Current  <u>6</u> Capacity</p> <p><b>Heather CBRF:</b>  <u>7</u> Current  <u>7</u> Capacity</p> <p><b>Chadwick CBRF:</b>  <u>7</u> Current  <u>7</u> Capacity</p>	<p><u>Capacity:</u></p> <p>CBRF: 33  Apts: Varies</p>	<p>Residential Services – Current focus is the residential medication administration practice and overall staff competency and training curriculum.</p> <p>In addition to the expansion of the Bellewood CBRF from a 6 bed to an 8 bed through the move to the new site. Residential is still in the application process of this.</p>	<p>Residential Services has a sad event but an event that truly expelled the caring environment and truly vested staff that the NCHC Residential Program has.</p> <p>The Jelinek Apartment supports many individuals. This supportive apartment setting is a very active younger group of residents who have strong connections to one another. As of recent, one of the individuals living in the setting has had many challenging medical issues. Staff has always expelled close attention to change in condition and have supported this individual well. However, this individual's condition recently turned terminal and was given only a few days left to live.</p> <p>During these few days staff went above and beyond with making sure the house mates visited daily and frequently despite staffing, and all those with connection got time in the hospital to visit. The amount of support the staff provided to both the member and the family while at the hospital was amazing. Many staff visited even privately on their</p>

	<p><b><u>Bissell CBRF:</u></b>  <u>6</u> Current  <u>6</u> Capacity</p> <p><b><u>Jelinek Apt:</u></b>  <u>21</u> Current  <u>21</u> Capacity  <u>0</u> Wait List</p> <p><b><u>Fulton Apt:</u></b>  <u>8</u> Current  <u>8</u> Capacity</p> <p><b><u>River View Apt:</u></b>  <u>14</u> Current  <u>Varies</u> Capacity  <u>2</u> Wait List</p> <p><b><u>Forest Jackson</u></b>  <u>17</u> Current  <u>Varies</u> Capacity</p>			<p>own time. The family stated to the manager that the client loved living at the supportive apartment setting and loved the care she received. Staff created picture boards for the funeral and made sure all her friends from the supportive apartment attended the funeral. All of residential services was supportive with a huge turn out and the family was emotionally moved buy the compassionate and caring employees.</p>
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Key: ADS – Adult Day Services; AODA = Alcohol & Other Drug Abuse; BHS = Behavioral Health Services; CSP = Community Support Program; CCS = Comprehensive Community Services; OP = Outpatient; MH = Mental Health