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

| December 9, 2016 |                | 10:30 a.m. |                  | NCHC – Wausau Campus |             |
|------------------|----------------|------------|------------------|----------------------|-------------|
| Present:         |                |            |                  |                      |             |
| X                | John Robinson  | Χ          | Holly Matucheski | Χ                    | Greta Rusch |
| Χ                | Scott Parks    | Χ          | Nancy Bergstrom  | EXC                  | Linda Haney |
| Χ                | Yee Leng Xiong |            |                  |                      |             |

Others Present: Jeff Zriny, Michael Loy, Laura Scudiere, Brenda Glodowski, Becky Schultz, Sue Matis, Tom Dowe, Jessica Meadows

The meeting was called to order at 10:31 a.m.; roll call was noted, and a quorum declared.

Laura Yarie was unable to attend. Lee Shipway tendered her resignation. Committee will send a letter of appreciation for her years of valuable service.

## Consent Agenda

Motion/second, Bergstrom/Xiong, to approve the consent agenda which includes the 11/11/16
Human Services Operations Committee meeting minutes and the Financial Report. Motion
carried.

## **Human Services Outcome Reporting**

- October was an unusually high month in crisis. Youth crisis is trending much higher than last year. Using data to look at intervention and services to more adequately deal with patient population. Interesting to note that crisis contacts volume tend to track together between 2015 and 2016.
- Demand for Community Treatment, case management program, is growing. Community
  Treatment sees individuals who have AOD or diagnosed mental illness. Case managers see
  clients in their homes or where they are most comfortable. Some staff visit with clients several
  times a day, some weekly and others monthly. Intent is to help clients live their best lives and
  maintain functionality within the community; and also includes medication management. An
  advocate for our patients.
- In crisis and youth there is a change in philosophy by Social Services not to use secure detention if at all possible. Social Services would rather see shared patients receiving treatment from different avenues for behavioral health and mental health issues. Secure detention is not necessarily the best treatment. Schools have increased their use of NCHC services as they now feel crisis services are better for juveniles. Would like to track where opioid and drug issues are hitting the community if there is a method to do so. We also have youth case managers in Community Treatment who are often case managing both the children and the parents as these situations affect the entire household. We are also working with a behavioral health grant and CHIP with the Health Dept. to look from a preventative standpoint. School counseling will be a major addition to this also. The youth crisis contacts graph shows an upward trend from 2015 to 2016.

- Where are we in terms of capacity? Does this upward trend pose capacity issues that need to be addressed? We want to be proactive vs reactive with adequate resources.
- o Highest priorities next year are youth and adolescents then adults.
- Will be looking at a 6-8 bed youth crisis stabilization home; expansion of the MMT program from a capacity of 6 to 20; residential treatment program with the State looking to expand Medicaid coverage; CBRF expansion with step-down programming; and structurally addressing the multi-bed to single bed capacity on the inpatient unit. With the new agreement in place we will be reviewing the options and then move them through the RCA.
- We also need to equip others in the community to address crisis in the community before
  needing crisis treatment therefore training has begun in helping to de-escalate situations in the
  community and in schools.
- Sheriff's Dept. doing a lot in the last year, the Wausau Police Department is posting for a mental health therapist, we also have a crisis worker in the Wausau Police Department and therapists in the jail. Combining efforts to develop improved behavioral health and hopefully decrease the burden on the criminal justice system too.
- Additional data is being gathered and will be reported.
- Transportation program is working well. We will not be able to transport all patients due to some individuals needing restraints but have been transporting for medical clearance, etc. and no safety issues so far.
- Crisis Process Improvement Team is reviewing their action plan, looking at new goals now that it's been a year. Lincoln County has been invited but no attendance so far. Langlade County participated for the first six months but not lately. Nancy Bergstrom asked to be invited.
- Wait times have increased due to two vacant counselor positions in Antigo. These are not easy to fill but working diligently on recruiting.

## Marketing Programs – Jessica Meadows

- Jessica Meadows provided an overview on marketing activities, statistics, and growth.
- Y. Xiong recommended reaching out to Hmong radio, involvement in Hmong New Year event; have any videos translated in Hmong; appreciates that some documents are multi-lingual.
- 2017 marketing budget has been reduced by 10% from 2016. Utilizing a broad range of outlets to connect with community i.e. Facebook and other social media platforms.
- Have begun gathering information from Outpatient Services of how individuals heard of us. Will do this in the nursing home also.
- N. Bergstrom commented that the weekly News You Can Use newsletter is very well done.
- 2017 activities will include getting the campuses and centers supplied with internal marketing materials for waiting rooms, hallways, elevators, etc. Exploring TV displays in various areas also.

### Aquatic Therapy Pool Review of Consultant Report

- Last consultant report was distributed. This consultant was at the request of Marathon County as they wanted to truth test the numbers.
- Marathon County Health & Human Services will be making recommendations about the future of the pool following the Tri-County Agreement anticipated approval.
- The pool is beyond its expected life; has changed in use over the years and evolved into warm water therapy.
- Committee requested that information be provided on the impact of the cost and on NCHC and the impact on the counties.

- Advantages and disadvantages need to be identified as well as if we are able to be reimbursed being linked to the behavioral health unit.
- Possible for next meeting: is this appropriate for the mission of NCHC? What are the benefits to the population served and throughout the facility i.e. behavioral health, nursing home, etc?
- J. Zriny noted that Health and Human Services Chairman Bootz indicated the pool would be addressed in the first quarter of 2017. Concerns have been expressed and the community is looking for a definitive answer.
- Inaction has a financial detriment as experienced this year.

## <u>Update on Tri-County Tentative Agreement</u>

- Tentative agreement reached last week after 2-3 months of negotiations. Ultimately ended where everyone can move forward. Last time an agreement was reached was 2008.
- The new agreement includes several updates:
  - o Limited 5 year agreement, ultimately the withdrawal is the same but with a more active decision to continue partnership.
  - RCA was created with county representatives (1 each from Lincoln and Langlade Counties and 2 from Marathon County). Under 51.42 statutes in the creation of community services the county can retain authority which is what they want at this time. The parties have agreed to retain authority for the CEO selection, compensation plan, budget, assessment of services, program creations, suspension and termination; RCA will review on regular basis and make recommendations to the 3 county boards.
  - Three county boards will be voting on the agreement on 12/20/16. Health & Human Services voted unanimously in Marathon County to adopt the agreement but there may be discussion about revising the committee structure, however the other counties will not agree to a revised structure.
- Once the agreement is adopted, the work in the next 6 months is enormous. M. Loy will provide a work plan in an effort to set NCHC up for success and be able to comply with the agreement.

#### **Future Items for Committee Consideration**

- Will continue to reach out to Laura Yarie for discussion on OWI.
- Update on crisis services including performance expectations and plans for crisis services.
   Committee would like to have several members of the Crisis Process Improvement Team at a future committee meeting.
- HSOC give thought to what we should be doing in terms of crisis and others.
- Lincoln and Langlade County representatives were asked to check with their county agencies on whether crisis services are being addressed.

Motion/second, Xiong/Matucheski to adjourn the meeting at 11:51 a.m. Motion carried.