NORTH CENTRAL COMMUNITY SERVICES PROGRAM QUALITY COMMITTEE MEETING MINUTES – OPEN SESSION

December 16, 2016	12:00 p.m.	NCHC – Wausau Campus
-------------------	------------	----------------------

Present: EXC Steve Benson EXC Darren Bienvenue X Ben Bliven
X Kue Her X Heidi Keleske X Via phone Holly Matucheski
EXC Corrie Norrbom X Via phone Jeannine Nosko

Others Present: Becky Schultz, Kim Gochanour, Sue Matis

The meeting was called to order at 12:11 p.m.; roll call noted; a quorum declared.

Public Comment for Matters Appearing on the Agenda

No public comments were made.

Consent Agenda

Motion/second, Keleske/Bliven, to approve the 9/15/16 Quality Committee Meeting Minutes.
 Motion carried.

Outcomes Review

- The 2017 Organizational Dashboard will see some changes:
 - Moving from a comparison of percentile rank (a comparison to the data base) to a 9/10 response rate (on a scale of 1 to 10) on the 'Overall Satisfaction' question. The reason for the change is so that employees can better see progress and the data base is so tight that a 1% move on our own score can have a significant change in the percentile ranking. Mr. Bliven requested the percentile rank continue to be provided also.
- Not quite reaching access measure in Behavioral Health Services; currently have two counselor position openings in Antigo which is a difficult recruitment.
- Aquatic Services had a decline in access due to the Physical Therapist being out on a leave of absence.
- Continue to work to improve patient satisfaction including reaching out to families. Many times a family member completes the survey in the nursing home and developmental disabilities program areas. The patients/clients typically complete the survey in outpatient services and community treatment. However, there is a desire to gather input from family members also as teams feel family input is important since they often times are involved in and supporting treatment of the patient/client and there tends to be better success in the treatment. We are in the process of developing this data and will report in January on the progress.
- Medication error score is a year-to-date score which has improved significantly in the last few
 months. Nurses have received additional training particularly on the unit dispensing system on
 the inpatient unit. Pharmacy has been auditing also.
- Suggestion made to explore the utilization of medical assistants in addition to CNA's and nurses.
 Will look at regulatory compliance to be certain of how we can use this position. We have a number of CNA's going into the nursing profession and looking to support them in their next roles.
- **Motion**/second, Keleske/Nosko, to approve the Organizational and Program-Specific Outcomes as well as the Adverse Event Data and actions taken. Motion carried.

<u>Process Improvement Team Reports</u> – Laura Scudiere and Becky Schultz

- The Crisis Process Improvement Team has been in place about one year. It was initiated due to community feedback from partners expressing concerns about crisis services at NCHC.
- Team is reviewing their progress and goals; and where they want to go from here.
- Elements specific to NCHC include consistency of crisis process, training of staff in crisis, inconsistent application when medical clearance was needed, and communication between crisis staff and physicians.
- Heidi Keleske, involved in this team, indicated there were high expectations and there has been great progress from the start, great interaction, and is impressed with the work from the committee. Many individuals and groups have participated. Transparency and communication has improved.
- Team is a great example of what can be accomplished when meeting i.e. where we started a year ago, many people have changed and the team has gotten to a new level.
- The PI team will determine the direction moving forward at its next meeting and currently seems to be looking at it from a broad community perspective i.e. youth crisis, capacity, and access in general. This is not NCHC alone but a community-wide challenge and concern. Will continue to report on what the team decides as next priorities.

<u>Safety Plans</u> – Becky Schultz

- Safety Committee has vetted all of the safety plans which also adhere to Joint Commission requirements. No changes from last year but must be reviewed annually.
- Plans were reviewed; section on hazardous waste has a sentence that was incomplete and will be corrected.
- Motion/second, Matucheski/Nosko, to approve the safety plans as reviewed. Motion carried.

CLOSED SESSION

- Motion/second, Keleske/Her, to move into closed session pursuant to Section 19.85(1)(c) and (f) Wis. Stats. for the purpose of considering employment and performance evaluation of any public employee over which the governmental body exercises responsibility, and preliminary consideration of specific personnel problems, which if discussed in public, would likely have a substantial adverse effect upon the reputation of any person referred to in such problems, including specific review of performance of employees and providers of service and review of procedures for providing services by Agency. Roll call taken: Yes=5, No=0 Motion carried and moved into closed session at 12:41 p.m.
- Motion/second, Keleske/Her, to come out of closed session. Motion carried unanimously.

<u>Possible Announcements Regarding Issues Discussed in Closed Session</u> – Ben Bliven

No announcements necessary.

Quality Moving Forward – Becky Schultz

- Because there are a number of new members on the committee, it was felt a discussion on Quality Moving Forward was appropriate and important at this time
- Becky provided a brief presentation.
 - o Is our current system working well to bring items forward to improve and get better in the organization? Suggestions on additional detailed reported could include: a more detailed 'dashboard' report in addition to the broader organizational dashboard at the Board level. Committee agreed.
 - The Collaborative Care Committee was created in 2016 as an Ad Hoc Committee under Quality to discuss any significant issues with other community partners in a confidential manner.
- Committee was asked to:
 - o Think about and provide input for 2017 in the following areas:
 - o What is working well?
 - What can we do better? More in-depth orientation for newer committee members;
 additional detail and understanding of measures of dashboard;
 - What initiatives will come out of the Person Center Service training that staff received? Additional 'Moments of Excellence' and 'Witnessing Excellence' reporting.

Future agenda items

• Person Center Service Presentation

Motion/second, Keleske/Nosko, to adjourn the meeting at 1:26 p.m. Motion carried.

dko