

NORTH CENTRAL COMMUNITY SERVICES PROGRAM BOARD MEETING MINUTES

February 28, 2019

12:00 Noon

Wausau Board Room

Present:

X	Norbert Ashbeck	X	Randy Balk	X	Steve Benson
X	Ben Bliven	X	John Breske	X	Meghan Mattek
X	Bill Metter	X	Corrie Norrbom	X	Rick Seefeldt
X	Romey Wagner	X	Bob Weaver	EXC	Theresa Wetzsteon
X via phone	Jeff Zriny				

Also Present: Michael Loy, Brenda Glodowski, Kim Gochanour, Laura Scudiere, Jennifer Peaslee, Lance Leonhard

Guests: Chrissy Seidler, Daniel Shine and Alvin (NCHC's Therapy Dog)

1. Call to order

- S. Benson called the meeting to order at 12:02 p.m.
- M. Loy introduced Alvin, North Central Health Care's Therapy Dog and Daniel Shine, MMT Manager. Alvin is a two year old Golden Doodle who has been at NCHC for two weeks. Daniel is the designated handler who attended an intensive two week training course with Alvin prior to bringing Alvin to NCHC. Alvin is gradually integrating to the Behavioral Health Services area being onsite a few hours each day to start. A goal is for him to attend groups/sessions, possibly be available for client requests, and eventually help diffuse certain crisis situations.

2. Public Comment for Matters Appearing on the Agenda

- None

3. Chairman's Report and Announcements

- None

4. Board Committee Minutes and Reports

- None

5. Consent Agenda

- **Motion/second**, Metter/Norrbom, to approve the Consent Agenda, motion carried. Consent Agenda includes:
 - 1/31/2019 NCCSP Board Meeting Minutes
 - Human Services Operations Report
 - Nursing Home Operations Report
 - Annual Review and Approval of the following Board Policies:
 - Capital Assets Management Policy
 - Cash Management Policy
 - Contract Review Policy

- Medical Staff Appointment Recommendations for Dia Arpon, MD, Sencan Unal, MD, and reappointments for Jean Baribeau-Anaya, PA-C, Laurence Gordon, DO, Bababo Opaneye, MD, and appointment amendments for Anne Dibala, MD, and Leandra Lamberton, MD.

6. Board Education – Overview of the Individual Placement and Support (IPS) Program at NCHC – Christine Seidler

- NCHC was awarded a grant to initiate the implementation process. We are excited to share that we received an exemplary status from the most recent State review of our program.
- The IPS Program helps promote the recovery of people with severe and persistent mental illness by helping them build their own personal skills such as resume building, completing applications, improving work skills, securing employment in areas the individuals are interested in, etc. Employment Specialists work directly with the individual and employer in the work setting until both are comfortable with the working relationship. Employment opportunities range from entry level service to business management. In 2012, when NCHC began measuring IPS employment rate outcomes, the targets were between 11-18% and in 2018 the Tri-County IPS Employment rate was 64%. These outcomes indicate that adhering to the IPS model and providing exemplary services are directly related to consumer success.

7. Monitoring Reports

A) CEO Work Plan Review and Report – M. Loy

- Campus renovation plans will be presented to the Marathon County Board in March. We are currently working through the City approval process (scheduled in 3 weeks), and waiting on one variance. We will be providing elevation pictures on what changes will occur and how they will impact the community. The pool design should be signed off by end of this week, bidding should begin in May with groundbreaking in June. Please look for an invitation for the County Board meeting in March which will include a video of the renovation plans and updates.
- Langlade County is reviewing space allocations to acquire more space for their growing needs. We are reviewing our physical space and plan to provide an update next month.
- Todd Boutain will begin March 4 as the Information Services Executive. Ashley Downing will also begin March 4 as the Information Services and Health Information Management Director. Both bring experience and management skills to these areas that will help us grow and meet the needs of the organization.
- Sue Matis, Human Resources Executive has an incredible professional opportunity and will be leaving as of March 15. She sent a letter to Mr. Zriny which was shared with the Board. The change in this area presented an opportunity to review the Executive Team structure. An updated Organizational Chart was distributed. Changes include promoting two human resources positions to the director level, promotion of the Marketing and Communications Manager to Director, moving Volunteer Services under the Nursing Home structure, and moving Transportation Services to a new position of Operations Executive. The position is ready to be posted and begin recruitment.

B) Quality Outcomes Review – M. Loy

- For 2019 the overall structure remains around 5 pillars of excellence with each connecting to End Statements.
 - 1) *People*: Vacancy and Retention Rate measures were retained from 2018.
 - 2) *Service*: Patient Experience has had a full transition to a new survey and we now have 6 months of data to establish a meaningful target for 2019.

- 3) *Clinical*: Readmission Rate includes nursing home and hospital. Additional detail is provided at the Program Dashboard level. The Nursing Home Star Rating has not changed since CMS froze the rating. We project we would be at 3 to 4 stars if our most recent surveys would be included. Adverse Event Rate incorporates both employees and patients (identified separately on dashboard). B. Bliven asked for additional detail regarding the out of county data which L. Scudiere will provide at a future meeting. Employee rate is higher due to weather related slips and falls. Total Hospital Days includes diversions.
- 4) *Community*: Access Rate is a composite score of all programs. Last year we made a many changes which positively impacted this rate.
- 5) *Finance*: Net Income is a new metric to look at earnings after expenses are deducted and should improve cash on hand.

- **Motion/second**, Wagner/Seefeldt, to accept the Quality Dashboard and Executive Summary. Motion carried.

C) Chief Financial Officer's Report – B. Glodowski

- There was a gain slightly over \$73,000. Both expenses and revenue were below target. The nursing home average census was 177 and the hospital census was 12. Some outpatient areas were down due to weather related days.
- Expenses overall were down. Even though health insurance was up by \$38,000 it did improve from the prior month. Expenses were up about \$58,000 which was better than anticipated but it is not where we want to be and we will continue to work in this area.
- The 2018 Audit will be presented in March. As of today the auditors do not have any adjustments related to operations. They do have the GASB adjustment (pension related) which is anticipated to be about \$745,000 but there is a new requirement GASB 75 related to life insurance. Several items are unadjusted but not considered significant. We are also looking very closely to set up and be prepared for the master facility planning project to begin. There should be no bottom line impact.
- We have active case management, including care coordinating conferences occurring regularly regarding diversions in an effort to make improvements and reduce expenses.
- **Motion/second**, Ashbeck/Weaver, to accept the January Financial Statements. Motion carried.

8. Board Discussion and Possible Action

A) ACTION: Program Application to the Retained County Authority Committee for a Sober Living Pilot Program in Langlade County

- Sober Living is an extension of treatment which supports treatment and recovery.
- The location of the program/facility cannot be near anything that would trigger a setback.
- Chris Grant, Medical College of Wisconsin medical student, who performed a needs assessment, suggested starting with a home for females first. No children would be allowed in this model at this time.
- Before being accepted into the facility individuals would need to have 30 days of sobriety and complete an assessment. This program is intended to support their current treatment program which would be a requirement.

- Acquisition of the home is a onetime cost. (Refer to financials in packet.) It is felt the program is scalable and would become more financially viable but would still require a levy subsidy. The proposal to Langlade County is for them to purchase a facility, provide the start-up costs, and ongoing maintenance of the property. If approved by the NCCSP Board the next step is for the Langlade County Board to approve as the Retained County Authority (RCA) has approved.
 - **Motion**/second, Wagner/Bliven, to approve the proposal as presented. Following discussion, motion carried.
- B) ACTION: Authorize Board Contingency Funding for the Human Services Research Institute (HSRI) to Perform a Comprehensive Community Environmental Scan and Strategic Plan
- M. Loy introduced David Hughes of HSRI. Loy was referred by leadership at the State of a project that Hughes had done. Hughes has been advising and consulting for the State and state-level organizations throughout the country.
 - Hughes shared his background and that of HSRI and described his proposed project and the goals of the project, data sources, and project timeline, and implementation process. (Refer to attached documentation.)
 - Hughes responded to questions from the Board i.e. If data is available they will look at interfacing between public and private providers in mental health services, a focus on developing prevention programs is a strong goal.
 - **Motion**/second, Metter/Wagner, to authorize contingency funding for HSRI to perform a comprehensive community environment scan and strategic plan at a cost not to exceed \$200,000. The Board instructed M. Loy to seek funding support for the project from other community agencies who may have an interest in the outcomes. Motion carried.
- C) ACTION: Amend the 2019 Capital Budget to authorize the Purchase of a New Occurrence Reporting System
- Several years ago the decision was made to custom build the Occurrence Reporting system within the TIER system (electronic medical record or EMR) which has been challenging for staff to utilize. With the update to our EMR anticipated in the next 1-2 years, we are recommending a stand-alone occurrence reporting solution, SafetyZone. There is a onetime up-front fee of \$45,000 and annual fees of \$7,000-\$8,000. Mattek commented that from her experience the SafetyZone product is very effective, quick, and one that she highly recommends.
 - **Motion**/second, Norrbom/Mattek, to amend the 2019 Capital Budget to authorize the purchase of a new occurrence reporting system in an amount not to exceed \$45,000 (see attached proposal). Motion carried.
- D) Board Educational Priorities for 2019
- Loy will reach out to five members of the Board and work one on one to develop issues for Board policy decisions over the next few months which will help develop education at the Board Retreat and throughout the year.

9. MOTION TO GO INTO CLOSED SESSION:

- A) **Motion** by Weaver to adjourn 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, to wit: Report of Investigations related to Corporate Compliance Activities and Significant Events; and for
- Second by Ashbeck. Roll call. All ayes. Motion passed 12-0. Meeting convened in closed session at 1:55 p.m.

10. RECONVENE to Open Session and Report Out and Possible Action on Closed Session Item(s)

- **Motion/second**, Bliven/Ashbeck, to reconvene into Open Session. All Ayes. Motion passed 12-0. Meeting convened in Open Session at 2:07 p.m.
- No action or announcements on the Closed Session Item(s) were made.

11. Review of Board Calendar and Discussion of Future Agenda Items for Board Consideration

- The March Board meeting will be one week earlier than the usual last Thursday of the month due to spring break the last week of March.
- The March Board meeting will include a presentation of the 2018 audit.
- There has been a lot occurring legislatively with health care as one of the largest issues in the last election. A handout from the Wisconsin Hospital Association was distributed. Governor Evers is a proponent of Medicaid expansion but the questions is what to do with those dollars. It is possible there could be additional money for Medicaid Reimbursement. Updates will be provided as information becomes available.

12. Assessment of Board Effectiveness

- None

13. Adjourn

- **Motion/second**, Ashbeck/Weaver, to adjourn the meeting at 2:09 p.m. Motion carried.