

**NORTH CENTRAL COMMUNITY SERVICES PROGRAM
BOARD MEETING MINUTES**

June 27, 2019

12:00 Noon

Lincoln County Service Center

Present:

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

Also Present: Michael Loy, Brenda Glodowski, Kim Gochanour, Laura Scudiere, Tom Boutain, Dr. Rick Immler, Lance Leonhard, Jennifer Peaslee, John Fisher

Guests: Nancy Bergstrom
Jason Hake
Dave Solin
Natasha Stubbe

1. Call to order

- J. Zriny called the meeting to order at 12:03 p.m.

2. Public Comment for Matters Appearing on the Agenda

- None

3. Chairman's Report and Announcements

- Thanks to everyone who participated in the CEO evaluation process. The 2018 CEO evaluation process is now complete.

4. Consent Agenda

- **Motion**/second, Weaver/Metter, to approve the Consent Agenda which includes:
 - Review of Draft Minutes of the 6/13/19 Executive Committee Meeting
 - Approve 5/30/19 NCCSP Board Meeting Minutes
 - Nursing Home Operations Report
 - Annual Review and Approval of Board Policy:
 - Business Associate Contract Management Policy
 - Investment Policy
 - CEO Work Plan Review and Report
 - Quality Outcomes Review, Review and Accept the May Quality Dashboard and Executive Summary
 - Chief Financial Officer's Report, Review and Accept May Financial Statements
 - Human Services Operations Report
 - Approve Medical Staff Appointment Recommendations for: Kimberly S. Hoenecke, D.O., Jeffrey A. Drexler, M.D., Debra A. Knapp, APNP, Leandrea S. Lamberton, M.D.

- Discussion:
 - ❖ If Lincoln County is favorable of this agreement for ongoing management of Pine Crest, NCHC anticipates recommending a project plan be developed with employees transitioning to NCHC employees.
 - ❖ In regard to the nursing home citation, the CMS report was received which included forfeiture of being a CNA training site. We will be seeking a waiver for this. An update will be provided once it has been finalized.
 - ❖ Dashboard vacancy rates are being driven by Behavioral Health and Inpatient departments. There are only 2 FTE nurse openings and 10 CNA openings in the nursing home.
 - ❖ As of May 31 we are experiencing a significant deficit. The major areas impacting the finances are diversions, health insurance, and physician contracts for locums. We continue to work to turn this around and will provide updates regularly.
- Motion carried.

5. Board Education and Discussion

- A. Recruitment Retention – Realistic Job Previews – Michael Loy
 - a. The Realistic Job Previews initiative is creating a video of several jobs within NCHC and using the video by posting online, providing it to individuals seeking employment for a realistic snapshot of the position and expectations. A video highlighting a Residential Care Worker was shown.
- B. Corporate Compliance and Quality Obligations of the NCCSP Board – Emerging Compliance Trends – John Fisher and Jennifer Peaslee
 - a. NCHC cannot have a dormant compliance program and is moving forward to strengthen our proactive compliance program.
 - b. Results of a recent survey of the Board asking their knowledge of the Corporate Compliance Program was reviewed. Results indicated additional education for the Board would be beneficial.
 - i. Jennifer Peaslee is NCHC Compliance Officer, and can be contacted at any time if questions or concerns arise.
 - c. The Board requested a better understanding of the two tier system between the Board and the RCA, liability, compliance, and obligations.
- C. Tier Replacement – Overview of the Project Scope, timeline and Costs to Replace the Behavioral Health System Electronic Health Record – Tom Boutain
 - a. Tier is the current electronic health record (EHR) and is probably the #1 problem with clinical staff from quality of the system, to inability to change the system without a significant cost attached.
 - b. Plans are in progress to replace Tier in 2020. History of the Tier product was provided. The challenges with the product and the supporting company were provided. Professional staff have note Tier as one of the main reasons they consider/leave employment. It is estimated physicians spend 1-1.5 hours extra per day because of Tier.

6. Board Discussion and Possible Action

A. Recovery Coaching – L. Scudiere provided an overview of the RecoveryCorp program (see details in the Board packet). The RCA reviewed and approved the program application at its meeting today. The program would cover Marathon, Lincoln and Langlade Counties and each county would provide the funds to cover costs for their county. The entire program is grant funded. Langlade County has not yet approved the program however if they decide not to participate a Recovery Coach would not be hired for that County.

- **Motion**/second, Metter/Norrbom, to approve the RecoveryCorp program provided the program is grant funded. Motion carried.

B. Revised **Mission, Vision, Values and End Statements:**

a. **Mission** - Langlade, Lincoln and Marathon Counties partnering together to provide compassionate and high quality care for individuals and families with mental health, recovery and skilled nursing needs.

b. **Vision** – Lives Enriched and Fulfilled

c. **Core Values** –

- Dignity** - We are dedicated to providing excellent service with acceptance and respect to every individual, every day.
- Integrity** - We keep our promises and act in a way where doing the right things for the right reasons is standard.
- Accountability** - We commit to positive outcomes and each other's success.
- Partnership** - We are successful by building positive relationships in working towards a system of seamless care as a trusted community and county partner.
- Continuous Improvement** - We embrace change through purpose-driven data, creativity and feedback in pursuit of the advancement of excellence.

d. **End Statements** -

- People** - Individuals served by North Central Health Care will have excellent outcomes as a result of a stable, highly qualified and competent staff who take pride in their work and the organization. North Central Health Care will be an employer of choice with a strong caring culture, fostering a learning environment, providing careers with opportunities for growth and development, and ensuring a best practices focus through a commitment to continuous improvement.
- Service** - We exceed our Consumer and referral source expectations and satisfaction as a result of our readiness, clarity of communication, and superb ability to follow through.
- Quality** - North Central Health Care meets or exceeds established regulatory requirements and best practice guidelines. We are a leader in our ability to assess and develop a comprehensive treatment plan, deliver excellent services and measure outcomes in real-time.
- Community** - Our Community will be able to access our services through a highly responsive seamless integration of services. We have strong affiliations with both public and private partners, proactively collaborating, and developing a continuum of care both prior to and after delivering services, constantly aware of our collective impact on the health of the population we serve.
- Financial** - We are a financially viable organization providing increasing value by driving efficiency, growth and diversification, being highly adaptable to changing conditions, and futuristic in our perspective.

- **Motion**/second, Wagner/Bliven, to approve the revised language as noted. Motion carried.

D. Pine Crest and Riverview Towers Management Agreements

- An updated was provided. K. Gochanour has been at Pine Crest as the Administrator for a month and B. Glodowski has been reviewing financials. We will be conducting an interview process for an Administrator at Pine Crest in July. We also are preparing for the potential for ongoing management at the request of Lincoln County. NCHC would manage the nursing home but Lincoln County is responsible for policy setting and facilities (similar to the arrangement NCHC current has with Marathon County). Benefits for each party is the purchasing power for better agreements with therapy, food vendors, medical supplies, etc. If a Management Agreement is approved, a transition committee would be requested during these changes.

7. **Motion**/second, Weaver/Bliven, 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, to wit: Report of Investigations related to Corporate Compliance Activities and Significant Events. Roll call. All ayes. Motion passed 10-0. Meeting convened in closed session at 1:40 p.m.
8. RECONVENE to Open Session and Report Out and Possible Action on Closed Session Item(s)
 - **Motion**/second, Benson/Metter, to reconvene into Open Session. All Ayes. Motion passed 10-0. Meeting convened in Open Session at 1:53 p.m.
 - No action or announcements on the Closed Session Item(s) were made.
9. Review of Board Calendar and Discussion of Future Agenda Items for Board Consideration
 - July meeting will include a review of our health care experience with our consultant, Crisis Assessment Response Team, employee compensation and practices for 2020
10. Assessment of Board Effectiveness: Board Materials, preparation and Discussion
 - No comments
11. Adjourn
 - **Motion**/second, Metter/Benson, to adjourn the meeting at 1:55 p.m. Motion carried.