OPEN MEETING MINUTES

Waukesha County Health and Human Services Joint Conference Sub-Committee Monday, June 6, 2022

Present Committee Members:	Larry Nelson; Christine Beck; Mike Goldstone, MD; Christine Howard
Absent Committee Members:	Vicki Dallmann-Papke
Present HHS Staff:	Julie Callies; Katie Dedrick; Maureen Erb; Marie Joncas; Darryl Kabins, MD; Debra Lane; Jeff Lewis; Jennifer Micheau; Mary Rueth; Jenny Rutter; Kristin Tranel; Lissette Vale
Absent HHS Staff:	Liz Arndorfer; Liz Aldred; Crystal Boyd; Michael Kopec; Wade Woodworth; Kirk Yauchler
Guests:	Julie Valdes

1. Call to Order

Christine Beck called the meeting to order at 1:32 p.m.

2. Review and Approval of Minutes

The March 7, 2022 minutes of the Joint Conference Committee meeting were reviewed and approved.

MOTION: Chris Howard moved, second by Mike Goldstone, MD to accept the minutes from the Joint Conference Committee (JCC) meeting on March 7, 2022. Motion passed without a negative vote.

3. Business Topics

a. Policies and Procedures

1. For Approval

A. Quality Assurance/Performance Improvement Plan

Jeff Lewis provided an updated on the new Quality Assurance/Performance Improvement Plan. He reviewed the handout titled "Waukesha County Department of Health and Human Services; Mental Health Center; Quality Assurance/Performance Improvement Plan."

MOTION: Mike Goldstone, MD moved, second by Christine Howard to accept the Quality Assurance/Performance Improvement Plan. Motion passed without a negative vote.

B. Sentinel Event

Jeff Lewis provided an update on the new Sentinel Event Policy and Procedure. He reviewed the handout titled "Waukesha County Department of Health and Human Services; Policy and Procedure; Sentinel Event." MOTION: Christine Howard moved, second by Christine Beck to accept the Sentinel Event Policy and Procedure. Motion passed without a negative vote.

Retired/Obsolete Policy and Procedures

Jeff Lewis verbally provided an update on the policies which were retired or have become obsolete.

b. Privileging

1. James Billings, MD

Jeff Lewis reported that the Credentialing Committee has met. The initial privilege request is for the time period of June 6, 2022, through June 6, 2023. License has been confirmed to be current, CMEs are up-to-date, and background check has been performed.

2. Darryl Kabins, MD

Jeff Lewis reported that the Credentialing Committee has met. The initial privilege request is for the time period of June 6, 2022, through June 6, 2023. License has been confirmed to be current, CMEs are up-to-date, and background check has been performed.

3. Marley Kercher, MD

Jeff Lewis reported that the Credentialing Committee has met. The initial privilege request is for the time period of June 6, 2022, through June 6, 2023. License has been confirmed to be current, CMEs are up-to-date, and background check has been performed. Pending proof of malpractice insurance coverage.

MOTION: Mike Goldstone, MD moved, second by Christine Howard to accept privileging of James Billings, MD; Darryl Kabins, MD; and Marley Kercher, MD pending malpractice insurance coverage for Dr. Kercher. Motion passed without a negative.

4. Reports

a. Hospital Services

1. Building Updates

Jeff Lewis reported the current building updates include new exterior doors being installed by facilities.

2. Operational Updates

Jeff Lewis informed the committee of operational updates which include a review of policies and procedures.

Training was provided in May to critical staff on assessments, de-escalation, and treatment planning. We continue to struggle with Nursing staff recruitment. We continue to use agency staff to meet the needs of nursing. Shared Governance is meeting with individual staff to discuss ideas for staff retention. MHC leadership is meeting with individual staff for 1:1 to identify what is working well for them, who is helpful and ideas for improvement. We will analyze the results each month.

Dr. Darryl Kabins has started as our new Clinical Director.

COVID-19 Update - Vaccination Mandate

We had a COVID-19 positive case. Temporary restrictions and isolation were put in place. Eight (8) days after her first symptoms and 24 hours after the patient's discharge, we resumed to previous guidance. This included return to visiting, congregate meals, admitting to Unit B and shared groups

3. Committee Reports

Jeff Lewis provided an update on the committee reports.

Clients' Rights Committee

There were five (5) informal and two (2) formal complaints that were investigated during the past quarter, and all were resolved at the supervisory level and informal. There was one caregiver misconduct investigated that was not founded.

Committee of the Whole

The Committee of the Whole continues to meet monthly. The Committee of the Whole reviews the committee reports, policies, operational issues and QAPI. The information from the meetings is summarized in the reports presented to the Joint Conference Committee.

Fire and Safety

The Fire and Safety Committee met in March. The Duress alarm system has been installed and updated. The issues identified in the annual environmental scan have been addressed. They were primarily minor maintenance issues.

Infection Control

The Infection Control Committee met April 18, 2022. The committee continues to review our COVID procedures. We have no hospital acquired infections. The COVID-19 guidelines were updated to include limited visiting, congregate dining, and shared groups as long as patients were asymptomatic.

Pharmacy and Therapeutic Committee

The Pharmacy and Therapeutic Committee is reporting no unusual prescribing practices. We are maintaining samples for IM medications. We continue to work with Genoa to refine the use of the Cubex System. Our Business Application Support team has engaged a consultant to look at our processes for medication ordering to find efficiencies.

Quality Assurance/Performance Improvement (QAPI)

The QAPI committee met. The QAPI Plan was approved by Committee of the Whole, and Medical and Psychological Staff. All departments are in the process of their annual review of indicators. QAPI was asked to monitor a special projects related to Important Message from Medicare and reducing seclusion/restraint.

Shared Governance

The Shared Governance team is working with staff to gather feedback in regards to staff retention.

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Utilization Review Deferred

b. Hospital Statistics and Information

Kristin Tranel reported out to the committee on hospital data points. She presented information on Mental Health Center revenue, Mental Health Center average census, Mental Health Center admission data, and referrals to the State Mental Health Institutes.

c. Fiscal Post-Discharge Insurance Denials

Mary Rueth introduced Lissette Vale. Lissette informed the group that Fiscal has submitted 1273 claims through June 7 for all of HHS. Top five reasons for denial: authorizations, payer guidelines, missing information, eligibility, and timely filing. January average days to pay is 15 days. 74% commercial insurance, 24% Medicaid, and 2% Medicare.

d. Utilization Review

Jennifer Micheau provided a Utilization Review update in which she summarized the department activities including insurance contacts, authorizations and appeals. She reviewed the data for February, March, and April 2022. There were no aberrant physician practice patterns identified and no physician advisor referrals.

e. Quality Assurance/Performance Improvement

Jenny Rutter reviewed the Quality Assurance Performance Improvement (QAPI) report from January through March 2022. Fourteen (14) departments were reviewed and six (6) of those met all indicators. Those that were below QAPI thresholds for quality were issues that were identified related to documentation and did not present care or safety concerns.

f. Medical and Psychological Staff

Jeff Lewis informed the committee that there is nothing in addition to the privileging and policies discussed earlier.

5. Announcements and Updates

There were no items discussed.

6. Next Meeting Agenda Items

• There were no items discussed.

7. Public Comment

There was no discussion.

8. Adjourn

MOTION: Mike Goldstone, MD moved, Christine Howard second by to adjourn the meeting at 2:53 p.m. Motion carried unanimously.

Minutes respectfully submitted by Maureen Erb

Approved on September 12, 2022