OPEN MEETING MINUTES

Waukesha County Health and Human Services Joint Conference Sub-Committee Monday, December 7, 2020

Present In Person

Committee Members: Larry Nelson

Present Via Conference Call

Committee Members: Mike Goldstone, Christine Howard, Adel Korkor, MD

Absent Committee Members: Christine Beck

Present In Person

HHS Staff: Maureen Erb, Marie Joncas, Jeff Lewis, Jenny Rutter

Present Via Conference Call

HHS Staff: Crystal Boyd, Luis F. Diaz, Mireya Garcia, Debra Lane,

Jennifer Micheau, Wade Woodworth, Isha Salva, MD

Absent HHS Staff: Jennifer Beyer, Lisa Davis, Cliff Hoeft, Michael Kopec,

Sandy Masker, Antwayne Robertson, MD, Kirk Yauchler

Guests:

1. Call to Order

Larry Nelson called the meeting to order at 1:33 p.m.

2. Review and Approval of Minutes

The September 14, 2020 minutes of the Joint Conference Committee meeting were reviewed and approved.

MOTION: Christine Howard moved, second by Adel Korkor, MD, to accept the minutes from the Joint Conference Committee (JCC) meeting on September 14, 2020. Motion passed without a negative vote.

3. Business Topics

a. Policies and Procedures

1. Inpatient Substance Use Treatment

Jeff Lewis verbally provided an update of the Inpatient Substance Use Treatment Policy and Procedure. He reviewed the handout titled "Department of Health and Human Services; Policy and Procedure; Inpatient Substance Use Treatment."

MOTION: Adel Korkor, MD moved, second by Mike Goldstone to accept the Inpatient Substance Use Treatment Policy and Procedure. Motion passed without a negative vote.

2. Retired/Obsolete Policy and Procedures

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

- Duty to Warn and Protect
- Seizure Protocol

4. Reports

a. Hospital Services

1. Building Updates

Jeff Lewis reported that the Mental Health Center the chlorine dioxide infuser will be installed in early 2021. We are awaiting approval from the State of Wisconsin.

2. Operational Updates

Jeff Lewis reported on our continued efforts to mitigate COVID by restricting visits, wearing masks, and social distancing. We are seeing a small increase in referrals for admission who are COVID positive or COVID exposed. We have submitted our request for certification under 75.10 Inpatient Substance Use Treatment and we are awaiting response from the State of Wisconsin.

3. Committee Reports

Jeff Lewis provided an update on all of the committee reports.

Clients' Rights Committee

There were two formal complaints that was reviewed with no rights violations found. There were two informal complaints that were resolved at the supervisor level. There were no rights limitations.

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 are summarized in the reports presented to the Joint Conference Committee.

Fire and Safety

The Fire and Safety Committee has met and reviewed plans for the evacuation exercise. The exercise occurred on November 13 and went well. There was involvement and coordination with the MHC, Communications Center, Law Enforcement, local hospitals and HHS departments. Staff at the MHC performed very well. We are reviewing the after action report in January 2021 to identify areas for improvement.

Infection Control

The Infection Control Committee continues to meet. We have no changes in our current COVID mitigation efforts. We have seen an uptick in referrals for Inpatient who are COVID positive or COVID exposed. We have no hospital acquired infections.

Pharmacy and Therapeutic Committee

The Pharmacy and Therapeutic Committee is working with the purchasing area regarding contracted services for 2021. We are exploring the use of a medication machine that will be controlled by the pharmacy and continue to look for

efficiencies in ordering and inventory control. We have completed an inventory of the medications at the MHC. We have started to use a sample program for Inpatient to help with costs.

Quality Assurance/Performance Improvement (QAPI)

Deferred committee meeting. A check-in meeting is scheduled for December 2020. We are planning to renew some of our QAPI efforts in 2021 such as special projects, department plans. It will require additional supports to relieve our QAPI-UR RN who has been covering both roles during the Pandemic.

Utilization Review

The Utilization Committee met on November 18, 2020. There were no aberrant practices noted by the reviewer. The committee reviewed follow up to the recommendations for improving discharge planning. The Fiscal department is also looking at ways to better identify patient insurance coverage and to connect patients to Badger Care and the affordable care products available.

b. Hospital Statistics and Information

Mireya Garcia reported on the hospital statistics. She reviewed documents titled "MHC Revenue – Actual vs. Budget 2013-2020," "Waukesha County Department of Health and Human Services; Mental Health Center Average Census," "Waukesha County Department of Health and Human Services; Mental Health Center Monthly Admissions," "Waukesha County Department of Health and Human Services; Mental Health Center Admission Data," and "Waukesha County Department of Health and Human Services; Mental Health Institute Referrals."

c. Fiscal Post-Discharge Insurance Denials

Jeff Lewis reviewed Jennifer Beyer Fiscal Post-Discharge Insurance Denials report. When comparing 2019 Year-To-Date and 2020 Year-to-Date statistics, there was a 29% reimbursement rate. All claims had not been submitted due to the pandemic.

d. Utilization Review

Jenny Rutter provided an update of Utilization Review in which she summarized the department activities including insurance contacts, authorizations and appeals. She reviewed the data for September, October and November 2020. There were no aberrant physician practice patterns identified and no physician advisor referrals.

e. Quality Assurance/Performance Improvement

Jenny Rutter reviewed the QAPI report. Fourteen (14) departments were reviewed and six (6) of those met all indicators. The issues that were identified were related to documentation, not care or safety. Processes and care delivery continue to be impacted by COVID-19.

f. Medical and Psychological Staff

Isha Salva, MD reported that a new psychiatrist is scheduled to start at the end of March 2021. We continue to recruit for an additional psychiatrist.

5. Announcements and Updates

Maureen Erb informed the group of the 2021 JCC schedule. Meetings will occur on March 1, 2021, June 7, 2021, September 13, 2021 and December 6, 2021.

6. Next Meeting Agenda Items

None

7. Public Comment

There was no discussion.

8. Adjourn

MOTION: Christine Howard moved, second by Adel Korkor, MD to adjourn the meeting at 2:37 p.m. Motion carried unanimously.

Minutes respectfully submitted by Maureen Erb

Approved on 3/1/2021