

OPEN MEETING MINUTES

Waukesha County Health and Human Services Joint Conference Sub-Committee Monday, September 13, 2021

Present Committee Members: Larry Nelson Christine Beck; Mike Goldstone, MD

Absent Committee Members: Vicki Dallmann-Papke; Christine Howard

Present HHS Staff: Liz Arndorfer, Jennifer Beyer, Crystal Boyd, Maureen Erb, Debra Lane Jeff Lewis, Jennifer Micheau, Mary Rueth, Jenny Rutter, Kirk Yauchler

Absent HHS Staff: Liz Aldred, Lisa Davis, Luis F. Diaz, Mireya Garcia, Marie Joncas, Michael Kopec, Isha Salva, MD, Wade Woodworth

Guests:

1. Call to Order

Larry Nelson called the meeting to order at 1:36 p.m.

2. Review and Approval of Minutes

The June 7, 2021 minutes of the Joint Conference Committee meeting were reviewed and approved.

MOTION: Christine Beck moved, second by Mike Goldstone, MD to accept the minutes from the Joint Conference Committee (JCC) meeting on June 7, 2021. Motion passed without a negative vote.

3. Business Topics

a. Policies and Procedures

1. *For Approval*

A. Food Storage

Jeff Lewis provided an update of the Food Storage Policy and Procedure. He reviewed the handout titled "Department of Health and Human Services; Policy and Procedure; Food Storage."

B. Inpatient Nursing Assessment

Jeff Lewis provided an update of the Inpatient Nursing Assessment Policy and Procedure. He reviewed the handout titled "Department of Health and Human Services; Policy and Procedure; Inpatient Nursing Assessment."

C. Performance Improvement - Nursing

Jeff Lewis provided an update of the Performance Improvement – Nursing Policy and Procedure. He reviewed the handout titled "Department of Health and Human Services; Policy and Procedure; Performance Improvement – Nursing."

D. Personal Hygiene – Food Service

Jeff Lewis provided an update of the Personal Hygiene – Food Service Policy

and Procedure. He reviewed the handout titled “Department of Health and Human Services; Policy and Procedure; Personal Hygiene – Food Service.”

MOTION: Mike Goldstone, MD moved, second by Christine Beck to accept the Food Storage Policy and Procedure, Inpatient Nursing Assessment Policy and Procedure, Performance Improvement – Nursing Policy and Procedure, and Personal Hygiene – Food Service Policy and Procedure. Motion passed without a negative vote.

2. Retired/Obsolete Policy and Procedures

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

b. Privileging

1. Chaz Johnson, MD

Jeff Lewis reported that the Credentialing Committee has met. The initial privilege request is for the time period of November 1, 2021 through December 31, 2022. License has been confirmed to be current, CMEs are up-to-date, and background check has been performed.

2. Jessica Juneau, PsyD

Jeff Lewis reported that the Credentialing Committee has met. The privilege renewals are for a 2-year time period through December 31, 2023. Licenses have been confirmed to be current, CMEs are up-to-date, and background checks have been performed.

3. Mercy Mahaga, APNP

Jeff Lewis reported that the Credentialing Committee has met. The privilege renewals are for a 2-year time period through December 31, 2023. Licenses have been confirmed to be current, CMEs are up-to-date, and background checks have been performed.

4. Isha Salva MD

Jeff Lewis reported that the Credentialing Committee has met. The privilege renewals are for a 2-year time period through December 31, 2023. Licenses have been confirmed to be current, CMEs are up-to-date, and background checks have been performed.

MOTION: Mike Goldstone, MD moved, second by Christine Beck to accept privileging of Chaz Johnson, MD; Jessica Juneau, PsyD; Mercy Mahaga, APNP; and Isha Salva, MD. Motion passed without a negative vote.

5. Recommendation for Motion to Approve Interim Clinical Director

We are seeking approval to allow the Health and Human Services Director to appoint an Interim Clinical Director until such time as the position is permanently filled. The Interim Clinical Director must meet qualifications as a Psychiatrist licensed to practice in the State of Wisconsin and qualified to provide psychiatric services as outlined in the roles and responsibilities section of the Medical and

Psychological staff Bylaws. Any person who is so appointed shall automatically have voting rights regardless of their employment relationship with Waukesha County, be it a county employee or contracted staff.

MOTION: Mike Goldstone, MD moved, second by Christine Beck, to approve the Health and Human Services Director to appoint an Interim Clinical Director until such time the position is permanently filled. The Interim Clinical Director must meet qualifications as a Psychiatrist licensed to practice in the State of Wisconsin and qualified to provide psychiatric services as outlined in the roles and responsibilities section of the Medical and Psychological staff Bylaws. Any person who is so appointed shall automatically have voting rights regardless of their employment relationship with Waukesha County, be it a county employee or contracted staff. Motion passed without a negative vote.

4. Reports

a. Hospital Services

1. Building Updates

Jeff Lewis reported the current building updates include replacement of windows and glass block on the Inpatient Unit.

2. Operational Updates

Jeff Lewis informed the committee of operational updates which include a new social worker, who started today and an APNP.

We have two retirements which includes Cindy McCarthy, who has worked for Waukesha County for 43 years, and Dr. Salva who will be retiring after 5 years on October 22, 2021.

We have a contract with Washington County for inpatient care and Dodge County is interested in obtaining services for inpatient care.

Committee Reports

Jeff Lewis provided an update on the committee reports.

Clients' Rights Committee

There was one (1) informal complaint and one (1) formal rights complaint. There were two (2) rights limitations. The complaints were evaluated and resolved at a supervisory level. No rights violations or limitations were found during the reporting period. May- September 2021.

There was a DQA review of an allegation of a rights violation. No findings of a violation were reported.

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 met on June 6, 2021. The committee is

monitoring all of the issues that were identified during an environmental scan. The issues were primarily related to a need for upkeep such as repair to leaky windows, cleaning areas, etc. It is estimated that 75% of the areas identified have been rectified with a plan to complete the remainder in the coming months. No area was identified as an urgent safety issue. All drills have been completed and emergency system checks are functional.

Infection Control

The Infection Control Committee met June 14, 2021. The committee continues to review our COVID procedures. We have no hospital acquired infections. Due to a resurgence in the Delta variant of COVID-19, we have returned to universal screening of everyone who enters the building. No changes to inpatient mitigation at this time. We continue to limit visitors to legal staff, professional staff and families when clinically indicated.

The newly installed water mitigation system has shown positive results. Water testing shows all areas within normal limits for monitored microbes.

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 implement Cubex System.

Quality Assurance/Performance Improvement (QAPI)

The QAPI committee met in August 2021. Departmental plans for improvement were approved.

Utilization Review

The UR Plan has been reviewed and updated. It is now with our Corporate Compliance Offer for review.

b. Hospital Statistics and Information

Jeff Lewis reported out to the committee on hospital data points. He 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

Jennifer Beyer informed the group that we have a new insurance clearing house which will be implemented by the end of 2021. There is still a lag in reimbursements due to COVID-19.

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 May, June, and July 2021. 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 April through August 2021. Fourteen (14) departments were reviewed and five (5) 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

Kirk Yauchler provided an update regarding the medical and psychological staff. He informed the group that we continue in our recruitment of a new psychiatrist to replace Dr. Salva. We have secured a Locum Tens Psychiatrist who will start in October of 2021. A Psychometric Technician has been hired and will assist with psychological testing.

MHC Leadership is investigating the use of ARPA funds for remodeling the Mental Health Center to include a separate Crisis Stabilization unit.

5. Announcements and Updates

Maureen Erb informed the group of the 2022 Joint Conference Committee dates which are: 3/7/2022, 6/6/2022, 9/12/2022, and 12/5/2022.

6. Next Meeting Agenda Items

- None

7. Public Comment

There was no discussion.

8. Adjourn

MOTION: Christine Beck moved, second by Mike Goldstone, MD to adjourn the meeting at 3:25 p.m. Motion carried unanimously.

Minutes respectfully submitted by Maureen Erb

Approved on December 6, 2021