

# WAUKESHA COUNTY

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

STRATEGIC PLAN  
2014 – 2016



**“ . . . leading the way with quality and value ”**

The Department of Health and Human Services, in partnership with our community and in response to public need and legal mandates, provides a wide range of efficient, quality, customer-oriented services that recognize the strengths and dignity of individuals and families, and that promote health, safety, self-sufficiency, and improved quality of life.

Antwayne Robertson, Director

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## **Waukesha County Mission Statement**

The mission of Waukesha County government is to promote the health, safety, and quality of life of citizens while fostering an economically vibrant community. We are committed to delivering effective, high-quality programs and services in a courteous and fiscally prudent manner.

## **Department of Health and Human Services**

### **Statement of Purpose:**

The Department of Health and Human Services, in partnership with our community and in response to public need and legal mandates, provides a wide range of efficient, quality, customer-oriented services that recognize the strengths and dignity of individuals and families, and that promote health, safety, self-sufficiency, and improved quality of life.

### **In All Our Work, We Value:**

- The strengths and dignity of individuals and families;
- The relationship we have with our public and private partners;
- The client-focused dedication, professionalism, and commitment of our staff;
- The optimal and cost-effective use of available resources.

### **Waukesha County Core Values:**

- Collaboration
- Ethics and Integrity
- Innovation
- Teamwork
- Efficiency
- Communication
- Diversity
- Seeking Cost Savings
- High-Quality Customer Service

## **Waukesha County Key Strategic Outcomes:**

1. A safe county
2. An economically vibrant county
3. An environmentally responsible county
4. A well-planned county
5. A county that assists at-risk citizens
6. A county that provides customers with quality programs and services
7. A county that provides cost-effective services delivered with competence and skill.

## **Waukesha Department of Health and Human Services Objectives:**

### **1.0 Strategic Outcome: A Safe County**

#### **Objective 1.1: Emergency Preparedness Skills of HHS Staff**

Protect the health and safety of citizens, by effectively and efficiently responding to emergencies by annually assessing employees' emergency preparedness skills and knowledge and provide quarterly employee training to address identified gaps. Through an annual HHS Survey, 80% of employees will agree they are prepared to respond.

**Objective Owner:** Public Health, Emergency Preparedness Coordinator

#### **Initiative/Action:**

1. Design survey to identify gaps. Initial survey will be through SurveyMonkey and will focus on familiarity with emergency notification systems, ability to respond to an emergency within 2 hours, staff perception of educational needs to be prepared. Potential questions include:
  - a. Are you aware that all HHS employees are considered first responders for HHS in the event of an emergency?
  - b. Are you familiar with the county's emergency notification system called AlertSense (formerly known as MyState)?
  - c. Is your contact information current in AlertSense/MyState?
  - d. Do you feel you and your family are prepared in the event you need to respond to an emergency (i.e. Are arrangements in place for dependent care, food, etc.)?
  - e. Are you reasonably confident in your ability to respond to an event within approximately 2 hours, if needed?
  - f. What types of training topics would help you better prepare for or respond to an emergency?
  - g. What type of training format would you find most helpful? (For example, e-mailed articles, on-line training, e-mailed PowerPoint, in person presentations, other...)?
2. Implement survey by sending it to all HHS employees via e-mail each November.
3. Analyze survey results to identify knowledge and preparedness gaps based on survey answers and staff comments.
4. Determine training priorities based on the identified knowledge and preparedness gaps as well as feedback from staff regarding preferred training methods.
5. Identify the educational tool(s) such as e-mails, online trainings, articles, videos, in-person training courses, etc. that will assist in narrowing the identified gaps.
6. Implement the selected educational tool(s) and distribute appropriately to staff.
7. Enlist the assistance of the Division Managers to encourage or require their staff to participate or complete the educational materials.
8. Repeat the survey annually in November to gauge progress towards 80% goal.

**Performance Measure:**

<b>Measure</b>	<b>2015 Estimate</b>	<b>2016 Goal</b>
Number of Trainings Provided in person, on-line or via email	2	4
Percentage of Employees Responding to the Survey	60%	70%
Percentage of Employees Responding Affirmatively	40%	60%

## 2.0 Strategic Outcome: An Economically Vibrant County

### Objective 2.1: Reducing Employee Absences in Hospital Health Systems

Assist five Waukesha County hospital health systems: Froedtert & the Medical College of Wisconsin, Inc.; ProHealth Care, Inc.; Aurora Health Care, Inc.; Wheaton Franciscan Healthcare, Inc.; and Waukesha County Mental Health Center to remain economically viable in reducing employee absences due to preventable communicable diseases among hospital and clinic based employees.

**Objective Owner:** Public Health Communicable Disease Control Services

#### Initiative Action:

1. Establish a local public health and health care systems committee to address employee preventable occupationally acquired communicable diseases.
2. Provide public health consultation on employee occupational communicable disease prevention recommended standards.
3. Provide public health consultation on employee occupational communicable disease control prevention and inpatient communicable disease control according to the CDC recommended communicable disease control standards for new emerging communicable diseases such as: Ebola, MERS-CoV, etc.

#### Performance Measure:

Measure	2015 Estimate	2016 Goal
Healthcare Systems Participation	4	5
Healthcare Systems Communicable Disease Training provided by Public Health	3	4

### Objective 2.2: Reducing Child Care Barriers to Employment

Provide safe, affordable and accessible child care services to the citizens of Waukesha County in order to reduce barriers to employment.

**Objective Owner:** Intake and Support Services

#### Initiative/Action:

Provide initial startup training and resource support to small business owners in Waukesha County in order to create certified child care providers.

1. Market small business owner's quality and reliable daycare services to the community.
2. Connect working individuals with quality child care services in Waukesha County.
3. Provide resource challenged families with appropriate cost effective interventions to reduce barriers to employment.

4. Develop efficiencies for time sensitive processing of Wisconsin Shares childcare applications.

**Performance Measure:**

Measure	2015 Estimate	2016 Goal
DCF Timeliness Month to Month Report	72.32%	85%
IM Project Call Center Average Speed to Answer	5 minutes	5 minutes

## 4.0 Strategic Outcome: A Well Planned County

### Objective 4.1: Community Health Improvement Plan and Process

Every five years, the Waukesha County Community Health Improvement Plan and Process (CHIPP) steering committee will make available information on the health status of the community, along with the identification of Waukesha County's leading health problems and health needs of the community, through a systematic collection, assembly and analysis of community health statistics. Key CHIPP steering committee stake holders of policy makers, community professionals and the general public will develop a community health improvement plan.

**Objective Owner:** Health and Human Services Board, CHIPP Community Steering Committee, Public Health Division

#### Initiative/Action:

1. The CHIPP co-chairs will establish a 2016-2020 Community Health Improvement Plan and Process steering committee membership and convene a CHIPP steering committee meeting to launch a new county 2016-2020 CHIPP by December 31, 2016.
2. The CHIPP steering committee will have a completed Community Health Assessment with identified leading health problems in Waukesha County by December 21, 2017.
3. The CHIPP steering committee will identify Waukesha County providers who will voluntarily take on a CHIPP initiative that will remediate one of the leading health issues in Waukesha County, by December 31, 2017.
4. The CHIPP steering committee will have completed a final 2016-2020 report informing the community on health improvements related to the CHIPP initiatives by December 31, 2020.

#### Performance Measure:

Measure	2015 Estimate	2016 Goal
CHIPP Plan and Response Team Outcomes	Final Report: 100% Completion	Launch 2016-2020 Community Health Improvement Plan and Process

## 5.0 Strategic Outcome: A County that Assists At-Risk Citizens

### Objective 5.1: Provide Support to Individuals Impacted by a Death

Minimize trauma and provide support to individuals impacted by a death, by coordinating with the Medical Examiner's Office and/or Waukesha County Health and Human Services to proactively outreach and offer assistance to affected individuals within an average of 5 days of referral.

**Objective Owner:** Veterans Affairs, Intake and Support Services, Aging and Disability Resource Center, Medical Examiners Office

#### Initiative/Action (Veterans Affairs):

1. Immediately notify the VA Regional Office.
2. Within 2 work days send a letter of sympathy and assistance to the surviving family member or the descendant's estate.
3. Upon request for assistance we will assist survivors with obtaining any eligible veteran's benefits from the state or federal veteran programs.
4. Immediately refer survivors to other agencies that can assist them with non-VA issues.

#### Initiative/Action (ADRC and Intake and Support Services):

1. Share referral policies and forms with MEs Office.
2. Upon receipt of referral, ADRC or Intake and Support Services Supervisor will assign ADRC Specialist or Intake and Support social worker to follow-up within 2 business days.
3. Meet bi-monthly to assess response and identify opportunities for quality improvement.

#### Performance Measure:

Measure	2015 Estimate	2016 Goal
Response time following Notification of Death	5 business days	2 business days

**Objective 5.2: Increase and Improve Access to Suicide Prevention Resources**

Increase and improve access to suicide prevention resources by developing a community wide network focused on reducing Emergency Detentions by reassessing crisis services, implementing Question, Persuade, Refer (QPR) protocol, providing Crisis Intervention Trainings and working closely with veterans to connect them with behavioral health treatment and support services.

**Objective Owner:** Clinical Services, Veterans Affairs

**Initiative/Action (Clinical Services):**

1. Include veteran's issues in CIT trainings.
2. Provide intra-departmental training on available crisis services.
3. Provide QPR education to youth, families and community staff.
4. Expand training on DHS 34 Crisis Intervention Services to all staff who meet qualification standards as mental health professionals.
5. Provide information on Impact-211 to all clients at intake and upon standard program or treatment review.
6. Explore enhancement of mobile crisis services to 24/7 basis to respond to the needs of subjects under consideration for emergency detention by law enforcement.
7. Collaborate with statewide initiatives using the Zero Suicide approach and bring training opportunities to service providers within Waukesha County.

**Initiative/Action (Veterans Affairs):**

1. Contact the Waukesha County HHS crisis worker for assessment, and Sherriff's Office if suicide risk is high.
2. Provide Veterans Crisis Line information to local agencies, posts and veterans.
3. Make referrals to the VA Medical Center or the Milwaukee Vet Center after consulting with the veteran.
4. When notified by representatives from NAMI, the Veterans Service Office will provide benefit or referral services to the affected client.
5. When notified of a homeless veteran, the department will contact the Supportive Services for Veterans Families or the Center For Veterans Issues to screen for placement.
6. When necessary, the Veteran's Office will contact local veterans and civic organizations to provide material assistance to homeless and low income veterans.
7. The Service Officer or Aide will request that the Veterans Service Commission will convene to provide assistance when all other options have been exhausted.

**Performance Measure:**

	<b>2015 Estimate</b>	<b>2016 Goal</b>
Number of Chapter 51 Interventions within the Calendar Year	995	945
"No Show" rate	Establish baseline	Reduce 10%

**Objective 5.3: Train Businesses on Strategies to Improve Customer Service for Individuals with Dementia**

In order to address the need for services for individuals and families impacted by dementia, the ADRC will launch a “Dementia Friendly Community” initiative to train businesses and their employees on strategies to improve customer experience for individuals with dementia.

**Objective Owner:** Aging and Disability Resource Center

**Initiative/Action:**

1. Engage community and statewide partners to assist with initiative expansion throughout Waukesha County.
2. Create business toolkit based on dementia care best practices.
3. Develop community relations plan to identify and connect with businesses to participate in program.
4. Train business owners and employees on becoming dementia friendly based on best practice curriculum identified by the state.
5. Market to the community “Dementia Friendly Businesses” through universal emblem, ADRC newsletter, traditional media and other mediums to be identified.
6. Develop plan to collaborate with Public Health on this initiative.
7. Review annual follow-up survey to business.

**Performance Measure:**

<b>Measure</b>	<b>2015 Estimate</b>	<b>2016 Goal</b>
Businesses trained and participating	5	10

**Objective 5.4: Develop/Utilize Community Resources to Serve Children with Special Needs**

As a result of an increase in the complexity of the special needs of children in Waukesha County, the Department will:

Identify, develop and/or utilize various community resources to most effectively serve and safely maintain children with chronic, disabling special needs safely in their communities. Success will be measured by parental satisfaction surveys as well as maintaining Waukesha County’s low ratio of children served in out of home care settings.

**Objective Owner:** Children and Family Services

**Initiative/Action:**

1. Facilitate quarterly Special Services Advisory Committee meetings to gather community input and review resources and identified needs.
2. Develop community services in coordination with private agencies and partnering county agencies to increase the at home and community based service array.
3. Attend state, regional workgroups to advocate for funding, allocations and policies.
4. Collect and analyze data utilizing the Program Participation System to determine unmet needs and trends in target groups in order to provide feedback to community partners regarding service gaps and resource needs.
5. Determine potential community partners, identify programs and services provided by partners to match programs and services to identified needs/target groups.
6. Distribute annual parent satisfaction surveys.
7. Create and distribute resource guide to families on waiver waiting list in order to minimize crisis development.
8. Extend “child find” efforts to improve identification of children qualifying for Birth to Three services.

**Performance Measure:**

Number of Child Out-of-Home Placements as Compared to Similar Sized County Per One Thousand Residents			
County	Child Population/# of kids in out of home care	2015 percent	2016 percent
Brown	62,163 / 471	.008	
Kenosha	41043 / 508	.012	
Milwaukee	234,315 / 3434	.015	
Dane	108,126 / 695	.006	
Racine	46,976 / 435	.009	
Waukesha	89,424 / 178	.002	maintain

Parent satisfaction.

<b>Measure</b>	<b>2015 Estimate</b>	<b>2016 Goal</b>
Parent Satisfaction Rating	70%	80%

**Objective 5.5: Improve Trauma Assessments thus Improving Permanency Outcomes**

The Department will enhance the health, safety and wellbeing of the children and families they serve, by improving trauma assessments, teaming and planning thus improving permanency outcomes as evidenced by decreased time in out of home care and a reduction in system re-entries.

**Objective Owner:** Children and Family Services

**Initiative/Action:**

1. Participate in the year-long “Breakthrough Series Collaborative” to improve the use of Child and Adolescent Needs and Strengths (CANS)/Family Assessment of Needs and Strengths (FANS) with families.
2. Increase knowledge of trauma in relative caregivers, foster parents and biological parents through trainings and direct interventions.
3. Increase the knowledge of CANS/FANS assessments in relative caregivers, foster parents and biological parents through training and direct interventions.
4. Utilize the post reunification program to increase supports and services to at-risk reunified families.
5. Reassess and/or develop programs to support an improved assessment process and teaming for parents and foster parents/relative caregivers.
6. Provide increased training on teaming and CANS/FANS trauma assessments for all on-going CPS social workers.
7. Develop supervisory tools and structure to improve oversight and quality reviews of worker’s practice in assessments and teaming.
8. Develop review panel for any re-entry cases to look for systemic improvements.

**Performance Measure:**

Measure	2015 Estimate	2016 Goal
Positives Response Rate to CANS Survey	3.5 of 5	4.5
Minimize Time Spent in Temporary Homes	53% reunify in 12 months 81% guardianship in 24 months 76% adoption in 24 months	60% reunify in 12 months 85% guardianship in 24 months 80 % adoptions in 24 months
Increase/maintain Stability of Placement Homes	89% 2 placements or less in 12 months 81% 2 placements or less in 13-24 months	90% 2 placements or less in 12 months 85% 2 placements or less in 13-24 months
Decrease in System Re-Entry Rates	21.5% re-entry rate	15% or less

### **Objective 5.6: Address the Rising Prevalence of Opioid and Heroin Addiction**

Waukesha County will address the rising prevalence of opioid and heroin addiction through a comprehensive community approach to prevent the abuse and misuse of prescription drugs and opiates, and prevent death by heroin overdose. HHS will coordinate the effort utilizing the recommendations of the State’s Heroin Workgroup and by providing leadership to implement the Five Pillars strategies.

**Objective Owner:** Heroin Task Force of HHS, Community Partners, Sheriffs, Medical Examiner, District Attorney

#### **Initiative/Action:**

1. Full array of accessible community-based substance abuse treatment and support services including the development of resources for opiate detox and recovery coaching.
2. Targeted marketing strategy to promote awareness of issue and treatment options.
3. Education of youth and families utilizing school-based resources.
4. Distribution of and training on the use of Narcan to reverse overdose.
5. Promotion of safe handling of prescription medications and use of medication collection sites.
6. Develop internet clearing house for prevention, education, treatment, resources and workplace tools to reduce opioid and heroin addiction.

#### **Performance Measure:**

<b>Measure</b>	<b>2015 Estimate</b>	<b>2016 Goal</b>
Number of people seeking services at HHS with opioid and heroin related issues	Establish baseline	5% increase
Implementation of Heroin Task Force Pillar Workgroups Plans	6	6
Increase in requests for information from Impact 2-1-1	Establish baseline	Increase 5%

**Objective 5.7: Provide Economic Support Services Efficiently through Moraine Lakes Consortium**

Provide Economic Support Services (FoodShare, Medical Assistance, Childcare) timely and efficiently through utilization of the Moraine Lakes Consortium call Center and monthly review of measurement data obtained through the Income Maintenance Project Daily Call Statistics and Ongoing Caseload Monitoring Reports.

**Objective Owner:** Economic Support

**Initiative/Action:**

1. Review performance data monthly in the Moraine Lakes Operations team meetings and through analysis of these data reports, adjust processes and work assignments to increase call center and case processing performance.
2. Present performance data bi-monthly to the Moraine Lakes Directors and obtain feedback and approval for the implementation of new processes to assist in continuous improvement efforts.

**Performance Measure:**

Measure	2015 Estimate	2016 Goal
IMMR Application Timeliness Report	97% of application processed within 30 days	98%
IM Project Call Center Statistics Report	5 minutes average speed of answer	5.0 minutes

**Objective 5.8: Receive Reports of Suspected Child Abuse/Neglect 24 hours/365 days per year**

The Department will receive reports of suspected child abuse and neglect (CAN) 24 hours per day, 365 days per year. Those reports that need further investigation (Initial Assessment) will be thoroughly and expediently completed.

**Objective Owner:** Intake and Support Services

**Initiative/Action:**

1. The Access Unit will receive CAN reports 24 hours per day during the regular work week.
2. The After-Hours Crisis unit will receive CAN reports weekends and holidays,
3. Data will be collected and analyzed from the eWiSacwis dashboards and internal daily reports.
4. All Wisconsin Department of Child and Families standards will be followed while receiving reports and throughout CAN investigations.
5. Screening decisions and completion of Initial Assessments will be timely.

Measure	2015 Estimate	2016 Goal
Screening decision will be made within 24 hours for all CAN reports	98%	98%
Attempted Face-to Face contacts will be made within State standard mandates	98%	97%
Initial investigations will be completed within 60 days	98%	97%

## 6.0 Strategic Outcome: A County that Provides Customers with Quality Programs and Services

### Objective 6.1: Maintain a Practice of Continuous Quality Improvement (CQI)

Maintain a practice of continuous quality improvement through annual program evaluations utilizing evidence based standards.

**Objective Owner:** Public Health, Clinical Services, Adolescent and Family Services

#### Initiative/Action (Adolescent and Family Services):

1. Develop a system to assess policies and procedures.
2. Annually assess programs utilizing evidenced based standards and implement quality improvement measures.
3. Train staff in the 18 month Carey Group's Evidence Based Briefcase series using Unit meetings to train all staff on a monthly basis.
4. Provide pre-test and post-testing to determine level of staff understanding.

#### Initiative/Action (Clinical Services):

1. Develop training for clinical staff on the Illness Management and Recovery fidelity standards.
2. Expand and enhance training for clinical staff on Person Centered Planning.
3. Work with Quality Assurance and Performance Improvement staff to develop and monitor clinical program outcomes.
4. Develop dashboards to maximize use of EMR reports to gather program outcome data.

#### Initiative/Action (Public Health):

1. Develop a quality improvement plan.

2. Train all staff on quality improvement concepts and the Public Health Division's plan.
3. Annually assess programs utilizing evidenced based standards and implement quality improvement measures.
4. Develop a system to assess policies and procedures.
5. Develop dashboards to maximize use of EMR reports to gather program outcome data.

**Performance Measure:**

<b>Measure</b>	<b>2015 Estimate</b>	<b>2016 Goal</b>
Policies and Procedures Assessed for Quality Improvement	3 for A & F 3 for PH	5 for A & F 5 for PH
Quality Improvement Projects Initiated and/or Completed	1 for A & F 1 for PH 1 for Clinical	1 for A & F 1 for PH 1 for Clinical
Pre and Post Test Improvement Ratio	50% for A & F 50% for PH	75% for A & F 75% for PH
Number of Staff Trained in CQI	30	60

**Objective 6.2: Create a Framework for Collaboration with the Local Criminal Justice System**

Create a framework for the local criminal justice system that will result in improved system outcomes through collaborative partnerships, systematic use of research, and a shared vision of desired outcomes.

**Objective Owner:** Clinical Services – Criminal Justice Collaborating Council

**Initiative/Action:**

1. Through a partnership with the state, participate in the National Institute of Corrections (NIC) Evidence-Based Decision Making (EBDM) Initiative.
2. Create a Policy Team made up of criminal justice system stakeholders to meet monthly with the NIC consultant.
3. Develop system wide change strategies that will align local and state jurisdictions with one another and with the principles of EBDM.
4. Prepare to implement identified change strategies.

**Performance Measure:**

Measure	2015 Estimate	2016 Goal
Members Attending Policy Team Meetings	89%	90%
System-wide Change Strategies Identified	N/A	4

**Objective 6.3: Improve Service to Scheduled Treatment Sessions**

Improve service utilization, reduce wait times, and increase adherence to scheduled treatment sessions by making optimal use of the transition to electronic records in the outpatient mental health and substance abuse services clinic.

**Objective Owner:** Clinical Services

**Initiative/Action:**

1. Assess the benefits and efficacy of expanding business hours in the outpatient mental health and substance abuse services clinic.
2. Evaluate the volume of intakes and on-going individual and group treatment contacts to determine baseline measures of wait times and “no shows”.
3. Research models of improved access such as Same Day Access and Just in Time Scheduling.
4. Implement enhanced array of evidence based practices such as collaborative documentation, recovery education and group-based peer support curriculums.
5. Continue with efforts to build a workforce of dually credentialed staff trained to provide mental health, substance abuse and integrated treatment interventions.

**Performance Measure:**

Measure	2015 Estimate	2016 Goal
Average # of days pending intake assessment	Establish baseline	Reduce 10%
“No Show” rate	Establish baseline	Reduce 10%

**7.0 Strategic Outcome: A County that Provides Cost-Effective Services Delivered with Competence and Skill**

**Objective 7.1: Aging and Disability Resource Center will Partner with Community Agencies to Improve Service Delivery**

In order to improve transportation services and decrease unmet needs as identified by consumers through ongoing feedback, surveys and focus groups, the ADRC will partner with community agencies to conduct a gap analysis and identify and implement strategies to improve service delivery in a cost-effective manner.

**Objective Owner:** Aging and Disability Resource Center, Community Partners, and Public Works

**Initiative/Action:**

1. Partner with Waukesha County Transportation Steering Committee and participate in bi-monthly meetings.
2. Provide outreach and educate community on ADRC Transportation services.

3. Collect, analyze and evaluate consumer data on an ongoing basis.
4. Identify future partners to meet needs.
5. Implement attainable improvements to service as identified by the ADRC, partners or consumers.

**Performance Measure:**

<b>Measure</b>	<b>2014 Actual</b>	<b>2015 Estimate</b>	<b>2016 Goal</b>
One new transportation initiative	New measure	1	1
Number of community education presentations/events	New measure	4	4

**Objective 7.2: The Department will modify current business policies to better meet customer needs, reduce denied claims, and improve revenue cycle integrity**

The Department will modify current business policies by analyzing staff utilization and implementing inter-divisional initiatives to meet customer needs. The Department will utilize electronic technology to improve service delivery and maximize funding. The Department will focus on the following areas: reduction in denied claims, increase in customer satisfaction, improve revenue cycle integrity.

**Objective Owner:** Administrative Services, Department of Administration Information Technology Division, Public Health, Clinical Services

**Initiative/Action:**

1. Review the use of additional denial reason codes, analyze data, determine and implement new process for the adjudication of denied claims; measure progress.
2. Track the reason codes for the denied medical claims and use the integrated system of electronic medical records, case management and scheduling to reduce denied claims.
3. Review, analyze and enhance intake process to collect appropriate billing/claims management documentation.
4. Review scheduling practices to assure the maximization of practitioner's available time
5. Review and evaluate the implementation of an automated appointment reminder telephone call system.
6. Develop informatics data analysis of payment patterns to evaluate payer performance, analysis data to industry benchmark and implement a plan to engage our payer in resolving deviations.
7. Provide service program supervisors with denied claim information at monthly budget driver meetings.
8. Provide and support community-based staff with tools needed to expedite services delivery and billing using electronic records technology.

**Performance Measure:**

Measure	2015 Estimate	2016 Goal
Reduction in Denied Claims	Baseline Year	Decrease 5%
Increase in Practitioner/Client Time Through Improved Scheduling Management	Baseline Year	Increase 5%

**Objective 7.3: Build a Culture of Trauma Informed Care**

Raise awareness and increase knowledge of basic trauma principles and trauma informed care practices among Waukesha County employees in an effort to build a culture of trauma informed care. Over the next two years, the Department will increase the number of individuals trained and pilot a “Trauma Checklist” system among social workers.

**Objective Owner:** Children and Family Services, Adolescent and Family Services, Intake and Support Services, Circuit Courts

**Initiative/Action:**

1. Host Trauma Partnership meetings held bi- monthly to bring stakeholders together and provide training opportunities.
2. Develop a Trauma 101 curriculum and begin training all Waukesha County Department of Health and Human Services staff.
3. Provide trauma trainings for Judges, attorneys and other professionals who work with trauma affected individuals.
4. Provide surveys at the completion of trainings to gauge increased awareness, understanding and confidence in ability to perform their job in a trauma sensitive way following the training.
5. Implement “Trauma Checklist” system among social workers to increase staff diligence in providing Trauma Informed Care to clients.
6. Supervisors review staff checklists and discuss strengths and weaknesses; provide feedback on how worker could make more use of trauma techniques.
7. Utilized regular supervision to probe staff about trauma matters and evaluate staff skill level in this area.
8. Staff to provide evidence of increased knowledge of trauma matters by incorporating these elements into regularly scheduled casework discussions with their supervisor.
9. Develop a HHS Secondary Trauma workgroup to create policy and practice for addressing ongoing trauma reactions, serious incidents and crises involving staff.
10. The “Trauma Checklist” will be completed in all Primary CAN Investigations and case openings by the Intake and Shared Services Division.

**Performance Measure:**

<b>Measure</b>	<b>2015 Estimate</b>	<b>2016 Goal</b>
Number of Individuals Trained	200	300
Trauma Informed Care Checklists Utilized in Case Management	20% in C & F	30% in C & F
Trauma Informed Care Checklists completed during CAN investigations or case openings	90%	98%

**Objective 7.4: Share Information Openly with Department Staff**

Through an annual employee survey, ensure that a minimum of 80% of Department staff have answered the following statement affirmatively: "I agree that information and knowledge are shared openly within my department."

**Objective Owner:** Health and Human Services Administration

**Initiative/Action:**

1. Implement and regularly review the communication plan for HHS employees.
2. Conduct a Supervisors' Administrative meeting every four months and share meeting minutes with HHS staff.
3. Post Exec Staff meeting highlights on intranet.
4. Director and Deputy Director meet every six months with new supervisors/managers for check in.
5. Director and Deputy Director attend individual unit meetings 1 to 2 times per year for communication purposes (stop, start, continue process).
6. Divisions to develop update process within their division.

**Performance Measure:**

Measure	2014 Actual	2015 Estimate	2016 Goal
Ensure a minimum of 80% of staff agree that information and knowledge are shared openly within the department.	64% county-wide  64% HHS	70% HHS	80% HHS

**Objective 7.5: Foster an Atmosphere of Professional Growth and Accountability**

Foster an atmosphere of professional growth and accountability, while providing support and recognition.

**Objective Owner:** Health and Human Services Administration

**Initiative/Action:**

1. Instruct all Department staff who conduct performance evaluations to discuss training needs and opportunities for professional development during individual staff reviews.
2. Monitor the inclusion of staff training needs and professional development in individual goals and objectives by performance reviewers.
3. Provide monthly training opportunities via EAG, lunch and learns, trauma informed care training, emergency preparedness training, ethics and boundaries training, HIPAA, corporate compliance, and CQI training.
4. Assess skill gaps and provide necessary training for EHR implementation.
5. Supervisors meet quarterly with staff to review professional development plan and assure access to training.

**Performance Measure:**

1. Through an annual employee survey, ensure that a minimum of 80% of Department staff have answered the following statement affirmatively: "During my annual performance evaluation with my direct supervisor, I discussed my training needs and opportunities for professional development."

Measure	2014 Actual	2015 Estimate	2016 Goal
Ensure a minimum of 80% of staff are aware of training needs and opportunities through performance evaluation process	72% county-wide 73% HHS	76% HHS	80% HHS

**Objective 7.6: Reward and Recognize Employees that Exemplify Waukesha County Core Values**

Facilitate a work environment that rewards and recognizes employees that exemplify Waukesha County Core Values.

**Objective Owner:** Health and Human Services Administration

**Initiative/Action:**

1. Promote the County Core Values on HHS intranet.
2. Incorporate the County Core Values in Staff Action recognition events.
3. Post the County Core Values in designated areas of the Health and Human Services Center Buildings.
4. Supervisors will relate daily tasks to core values during supervisory sessions and unit meetings.
5. Offer employee of the month and other staff recognition for demonstrating high levels of county core values in daily work and conversations.

**Performance Measure:**

1. Through an annual employee survey, ensure that a minimum of 80% of Department staff understand County Core Values.
2. Through an annual employee survey, ensure that a minimum of 80% of Department Staff agree that they “can be recognized for extra effort while demonstrating County Core Values.”

Measure	2014 Actual	2015 Estimate	2016 Goal
Ensure a minimum of 80% of staff understand the County Core Values	60% county-wide	70% HHS	80% HHS
Ensure a minimum of 80% of Department Staff agree that extra efforts demonstrating the County Core Values will be recognized.	60% county-wide 59% HHS	70% HHS	80% HHS