Board Members Present: Dr. Steven Kulick, Duane Paulson, Janel Brandtjen

Staff Members Present: Mary Lu Visauer, Jeff Lewis, Joan Sternweis, Dr. James Rutherford, Heidi Danko, Pat Russell, Randy Setzer, Cindy Buchholz, Crystal Boyd, Jennifer Beyer, Cliff Hoeft, Will Emslie, Maureen Erb

Excused Absence: Mike O'Brien, Christine Howard

Brandtjen called the meeting to order at 1:34 p.m. in absence of Chair O'Brien.

Minutes:
The December 7, 2015 minutes of the Joint Conference Committee meeting were reviewed.

MOTION: Kulick made a motion, second by Paulson to accept the minutes as published. All voted and the motion carried.

Announcements
The annual Public Hearing of the Health and Human Services Board will be held on Thursday, April 7, 2016, 7:00 p.m. at the Health and Human Services Public Health Department.

Lewis introduced Crystal Boyd, the new Patient & Nursing Services Coordinator. This is due to the retirement of Janet Koller.

The 2016 Hospital conference will be held on Thursday, May 12, 2016 in Wisconsin Dells. All are welcome to attend.

On Tuesday, March 8, 2016, Dr. Rutherford will be honored by NAMI as the professional of the year.

Brandtjen reported this is her last meeting and thanked everyone for their hard work and support.

Hospital Statistics:
Lewis introduced Will Emslie, the new Senior Financial Analyst in the Administrative Services Fiscal Division. Emslie provided a brief background about himself.

Lewis shared a handout on the hospital statistics with assistance provided by Emslie. The data is summarized in format of a graph from CY2015 and the first two months of CY2016. The total number of admissions is approximately 700, with 554 as unduplicated,
non repeating clients. The total number of readmissions for CY2105 is 77. Lewis noted the Hospital is seeing less frequent readmissions. Average length of stay is 8.4 days, and average census is 16-18 days. The graph provided shows the trends toward average census and admission data noted in the bar graph.

MOTION: Paulson made a motion, second by Kulick to accept the Hospital Statistics report. All voted and the motion carried.

Performance Improvement
Danko reported on the periods of December 2015, January and February 2016. A total of 18 inpatient departments with a total of 153 indicators were reviewed. The following departments have met all of their performance improvement standards for the months reviewed. They include:

- Facilities
- Occupational Therapy
- Housekeeping
- Dietary
- Nursing
- Psychological Testing

The twelve departments not meeting their threshold in one or more areas for this reporting period include:

- Health Information
- Laboratory
- Medical Services
- Radiology
- Inpatient Psychiatric Services
- Medically Managed Detox 51.45
- Psychological Group Therapy
- Seclusion & Restraint
- Infection Control
- Pharmacy
- Social Work

Danko reviewed the Quality Assurance Performance Indicators (QAPI) initiatives.

- Patient Suggestion box – 20 suggestions collected
- Patient Satisfaction Survey – 30 surveys were returned

The Inpatient department reporting periods will be moved up to enable timely reports. The unit clerk is doing concurrent chart review for signature, date, time of all entries, and flagging any that need attention. Additionally, the unit clerk is following up on any lab or medical test orders. This will reduce the items that need to be addressed at chart closing to expedite the process. The department is standardizing progress notes, psychiatric evaluation, and discharge summaries between outpatient and inpatient where possible to standardize the order of the data elements to match the new electronic format. Starting in April, the QAPI staff will meet with department leads to review current QAPI monitoring.
The goal is to review and explore Quality Assurance and Performance Improvement for best practice and best service to our customers.

MOTION: Paulson made a motion, second by Kulick to accept the Performance Improvement report. All voted and the motion carried.

Utilization Review (UR):
Boyd reported the Mental Health Center had a total of six patients; three who have been inpatient greater than thirty days and three who have been inpatient longer than two weeks. One patient is being discharged this week and receiving active treatment, and one patient is waiting for placement in a least restrictive environment. Boyd reported once a month outlying cases are reviewed at the Committee of the Whole meeting.

Medical and Psychological Staff:
Rutherford reported on the interview of resident physician candidates that will be working on the Mental Health Center Inpatient service. One resident physician will begin at the end of March 2016 as a limited term employee.

Rutherford reported on the annual Wisconsin Psychiatric Association meeting noting the organization is in processing of bringing back to the Milwaukee branch to develop into a regional group.

Hospital Services Update
Lewis reported the Committee of the Whole which all the subcommittees report into met three times on December 16, 2015, January 20, 2016, and February 17, 2016. Items completed or ongoing at the mental health center include:

1. The Fire and Safety committee continues to meet. Alarms all tested and well. The evacuation plan is almost complete for updating, and the shelter plan is in place.
2. Looking to resurface the seclusion rooms. Toured the rooms at Roger’s Memorial Hospital. Currently, looking at a less expensive option for the Mental Health Center.
3. The Client Rights Committee continues to meet. Jeff Lewis is the new Outpatient Client Rights Specialist, and Brad Haas is the Inpatient Client Rights Specialist. An informal complaint has been resolved and phone use rights were restored according to the person’s plan.
4. The Infection Control Committee continues to meet. No hospital acquired infections reported. Continue to monitor flu vaccinations and mandatory in-services.
5. Continue review of the Pharmacy policies and procedures. Explore the option to have a pharmacy dispensary onsite at the Mental Health Center.
Insurance Denials
Beyer provided a report on Insurance Denials and Claim MD. Claim MD has been implemented and is Waukesha County’s new method of electronically submitting claims and receiving electronic remittances. Beyer shared various examples of reports (i.e., individually, by facility, projections of claim and denial reports, etc.) provided by Claim MD.

Hoeft touched on another tool that was just approved called Incoder Pro. Incoder Pro will assist coders with checking cci edits, check for medical necessity before submission to Claim MD, and has an exclusive connection with the American Medical Association. The program allows you to check local termination coverage, fee schedules, quick step to check cci edits, physician compliance check, etc.

Policy and Procedures
Lewis reviewed the policy on policies. This allows Waukesha County to conduct reviews of policies and if no major changes, allows for sign off of the policy by the Administrator and Manager. The process is to have a subcommittee for each area. A summary is then provided to the Committee of the Whole and signed by the Administrator and/or Manager if no changes occur. If a revision does occur, then it goes to the Committee of the Whole, Med Psych, and then moves forward to JCC for sign off. Lewis shared an example how all the policies are tracked on one report.

Buchholz reported that out of the 15 policies, 13 policies had minor, incidental, or no changes. One policy needed to be reviewed and signed by the Medical Director, and the second policy needed to go to the Medical Psychological meeting. This process is far better than what was done previously.

Other
a. Update on Electronic Medical Records
Setzer provided an update on the Electronic Medical Records system. Setzer indicated that Waukesha County is mandated by the state-county contract to report incurrences for encounters for mental health substance in our core programs; otherwise called the PPS system. Currently, Waukesha County utilizes the PeopleLink software system that will be retiring. The department is working with Netsmart to develop a PPS process that can be uploaded and sent off to the state. The group meets weekly with Netsmart to get that implemented.

The other item the department is working on with the Electronic Health Record is the Practice Management System. The Practice Management System is vital to other modules so the department is looking at how to enhance the system before implementation of other modules. A meeting with Netsmart is scheduled. Estimate for implementation would be November 1, 2016.
Next meeting Agenda Items:
The next meeting will be on Monday, June 6, 2016. Agenda items for the next meeting include:
- Credentialing

Adjournment:
The meeting adjourned at 2:38 p.m.

MOTION: Paulson made a motion, second by Kulick to adjourn the meeting. All voted and the motion carried.

Respectfully submitted,
Linda Johnson, Recorder

Approved on 6-6-16