RETAINED COUNTY AUTHORITY (RCA) COMMITTEE OF LANGLADE, LINCOLN, AND MARATHON COUNTIES

AGENDA

Date & Time of Meeting: Monday, September 30, 2019 at 8:30 a.m. Meeting Location: Courthouse Assembly Room, 500 Forest Street, Wausau, WI 54403

In addition to attendance in person at the location described above, Board members and the public are invited to attend by telephone conference. Persons wishing to attend the meeting by phone should contact Marathon County Administration at 715-261-1400, at least 24 hours prior to the start time of the meeting for further instructions.

Committee Members: Lance Leonhard, Chair (Marathon County), Robin Stowe (Langlade County), Nancy Bergstrom (Lincoln County), Chad Billeb (Marathon County)

- 1. Call the Meeting of the Retained County Authority (RCA) Committee to Order
- 2. Approval of the minutes of the August 29, 2019 RCA meeting.

3. Policy Issue Discussion and Possible Committee Action

- A. Motion to Go Into Closed Session Pursuant to § 19.85(1)(c) Wis. Stats. to consider Performance Evaluation of a Public Employee Over Which the Governmental Body has Jurisdiction or Exercises Responsibility, namely the Chief Executive Officer of North Central Health Care. [Roll call vote suggested]
- B. Motion to Return to Open Session
- C. Possible Announcements or Action Resulting from Closed Session
- D. Consideration of the revised 2020 Performance Expectations & Outcomes Document for inclusion in the 2020 NCHC Annual Budget
- E. Review and Consideration for Approval of the 2020 North Central Health Care (NCHC) Budget
- F. Presentation of NCHC Program and Services Quality Report and consideration of next steps

4. Educational Presentations and Committee Discussion

- A. NCHC Conflict Resolution Protocol: County Complaint Policy and Reporting Guide
- B. Referral Source Survey Implementation Plan clarification of timeline and committee member responsibilities relative to stakeholder education
- C. Revision of the Tri-County Agreement
 - 1. Update on the discussion at NCHC Board and Initial review of Tri-County Agreement

5. Next Meeting Time, Location and Agenda Items:

- A. Future Agenda Items and Meeting Times
- B. Announcements

6. Adjournment of the RCA Committee meeting

Any person planning to attend this meeting who needs some type of special accommodation in order to participate should call the Marathon County Clerk's Office at 715-261-1500 or e-mail <u>infomarathon@mail.marathon.co.wi.us</u> one business day before the meeting.

		Presiding Officer or Designee
FAXED TO:	Wausau Daily Herald, City Pages,	NOTICE POSTED AT COURTHOUSE
FAXED TO:	and Other Media Groups	_
FAXED BY:	M Palmer	BY: M Palmer
FAXED DATE:		DATE:
FAXED TIME:		TIME:

THE RETAINED COUNTY AUTHORITY (RCA) COMMITTEE OF LANGLADE, LINCOLN, AND MARATHON COUNTIES MINUTES

Date & Time of Meeting: Thursday, August 29, 2019 at 10:00 a.m. Meeting Location: North Central Health Care, Juniper Rm, 1100 Lakeview Dr., Wausau

Attendance:		Present	Absent
	Nancy Bergstrom	Х	
	Chad Billeb	Х	
	Lance Leonhard	Х	
	Robin Stowe	Х	

Also Present: Michael Loy, Laura Scudiere, Jeff Zriny (NCCSP Board Chair), media personnel

1. Call Meeting to Order

- The meeting was called to order at 10:03 a.m. by RCA Chair Lance Leonhard.
- 2. Approval of the minutes of the June 27, 2019 RCA meeting. MOTION BY BERGSTROM, SECOND BY BILLEB, TO APPROVE THE MINUTES OF THE JUNE 27, 2019 RCA MEETING. MOTION CARRIED.

3. Policy Issues Discussion and Possible Action

A. <u>Consideration of the 2020 Performance Expectations & Outcomes Document for inclusion in the</u> 2020 NCHC Annual Budget

1. Review of committee responsibilities relative to the 2020 NCHC Annual Budget

Discussion:

NCHC CEO Michael Loy and NCHC Human Services Operations Director Laura Scudiere facilitate a discussion with committee members regarding the draft 2020 Program Expectations and Outcome Expectations. Loy and Scudiere provide an overview of the suggested modifications highlighted within the packet and members provide feedback on additional potential modifications. Areas of significant discussion include:

- Further integration of criminal justice partner rules/procedures (Department of Corrections, Criminal Court, etc.,) into staff training and communication strategies
- Further integration of social services partner rules/procedures into staff training and communication strategies
- Creation of partner summit and standard work documents as strategies to address training and communication needs.

Action:

No action taken.

Follow up necessary:

NCHC to revise the existing document to capture the discussion and return with an updated document in September.

4. Educational Presentations/Outcome Monitoring Reports - None

A. Update on the Marathon County NCHC Campus Construction Project and the Revision of the Facility Use Agreement/Lease

Discussion:

NCHC CEO Michael Loy and RCA Chair Leonhard provide a summary of the in-progress construction projects, the projects out for bid, and the projects bids yet to be let relative to the Wausau Campus.

Loy and Leonhard indicate that the review of the facility use agreement/lease is ongoing and is seeking to incorporate input from NCHC and County auditors. The goal of the effort is to develop a core document that can be applied in each of the member counties. Loy and Leonhard will continue to update the committee and will deliver a draft document when completed for review. One area that Loy expresses Marathon County should consider relates to the impact of the anticipated utility savings on the Wausau Campus and how those savings should be considered in developing the debt service schedule for NCHC.

Follow up necessary:

Marathon County staff to continue working on the draft document.

B. Update on the Langlade County Sober Living Pilot Project

Discussion:

Loy explains that the initial capital estimates for the property was \$390,000; however, environmental testing has significantly slowed the process and impacted the fundraising effort. Loy and Stowe explain that Langlade County recently approved the purchase of the proposed property contingent upon the securing of the necessary funds for the capital component of the project by the end of September. NCHC is moving forward with procurement for design of the property and recruitment of staff.

Follow up necessary:

None at this time.

C. <u>Revision of the Tri-County Agreement – Timeframe and Offering Of Potential Areas For Future</u> <u>Discussion</u>

Discussion:

Chair Leonhard reviews the provisions of the Tri-County Agreement related to revision of the agreement, specified in V.D.6. After discussion, consensus emerges that the committee begin addressing this issue promptly, so as to deliver a revised draft to the respective county boards for consideration in February of 2020 to take advantage of the significant institutional knowledge gained by the board members during their respective terms. Loy encourages the committee to contemplate including a provision in the agreement relative to the process to be used for considering requests to expand the partnership, or service delivery, beyond the existing three owner counties.

Follow up necessary:

Committee members are encouraged to consider specific areas for revision of the agreement.

D. <u>Semi-Annual CEO Evaluation Process – review of next steps</u>

Discussion:

Chair Leonhard references the committee's responsibility under the Tri-County Agreement relative to the CEO semi-annual appraisal process. Leonhard references that CEO Loy is in the process of completing his self-evaluation relative to the components set forth in Part II of the comprehensive annual appraisal document. Leonhard expresses that he will forward the document to members for consideration in their respective completion of the appraisal document. Leonhard will compile the information from committee members' respective appraisal documents into a single document for committee review.

Follow up necessary:

None at this time.

E. Update on Referral Source Survey Process

Discussion:

Loy and Scudiere discuss NCHC's ongoing efforts to implement a referral source satisfaction survey process. Committee members offer comments relative to modifications in the proposed process. Consensus emerges that the survey process will not be effective if it is not offered directly to the line-staff referral source on each occasion of referral. Consensus emerges amongst committee members, Loy, and Scudiere that an electronic (cell phone application, QR code based) survey would be the most effective tool to gather the necessary insight.

Follow up necessary:

Loy and Scudiere to make revisions to the proposed survey process and update the committee.

5. Next Meeting Time, Location and Agenda Items:

- A. Future Agenda Items and Meeting Times
 - 1. County meeting attendance expectations for Laura Scudiere
 - 2. Updates on items listed above
- B. Announcements none
- 6. Adjournment of the RCA Committee meeting MOTION BY STOWE, SECOND BY BILLEB, TO ADJOURN THE MEETING. MOTION CARRIED. Meeting adjourned at 11:45 a.m.

Minutes Prepared by Lance Leonhard on September 25, 2019

Department	Domain	Outcome Measure	2018 YTD	₫₽	2019 Target	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug
NCHC	COMMUNITY	Referral Source Surveys	/	仓	/	/	/	/	1	/	/	/	/
BIRTH TO 3	COMMUNITY	Eligible clients are admitted within 45 days of referral	100.0%	Û	90 - 95%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	/	/
BIRTH TO 3	COMMUNITY	Same day cancellation and no-show rate	12.9%	Û	10 - 12%	18.7%	34.1%	11.7%	10.3%	9.5%	4.6%	/	/
BIRTH TO 3	COMMUNITY	Average days from referral to initial appointment	11.6 days	Û	10 - 12 days	14.0 days	14.8 days	13.8 days	11.0 days	14.0 days	14.0 days	/	/
COMMUNITY TREATMENT	QUALITY	% of Treatment Plans completed within 30 days of admission	79.5%	€	90 - 95%	79% - (11/14)	96% - (25/26)	84% - (21/26)	100% - (11/11)	100% - (21/21)	100% - (46/46)	83% - (5/6)	100% - (25/25)
COMMUNITY TREATMENT	QUALITY	% of Treatment Plans reviewed every 6 months	91.4%	Û	90 - 95%	95% - (70/74)	87.5% - (77/88)	90.3% - (102/113)	98.1% - (103/105)	87.4% - (111/127)	100% - (88/88)	86.7% - (39/45)	88.9% - (96/108)
COMMUNITY TREATMENT	QUALITY	Employment rate of Individual Placement and Support (IPS) clients	47.6%	仓	48 - 52%	52.0%	42.0%	45.0%	53.0%	48.0%	56.0%	57.0%	61.0%
COMMUNITY TREATMENT	COMMUNITY	Eligible CCS and CSP clients are admitted within 60 days of referral	36.6%	Û	90 - 95%	59% - (20/34)	44% - (20/45)	47.7% - (31/65)	39.0% - (16/41)	45.9% - (17/37)	42.0% - (21/50)	42.5% - (17/40)	60.9% - (14/23)
COMMUNITY TREATMENT	COMMUNITY	Same day cancellation and no-show rate	3.6%	Û	2 - 3%	3.0%	3.8%	3.2%	1.8%	2.4%	3.1%	3.8%	3.0%
COMMUNITY TREATMENT	COMMUNITY	Average days from referral to initial appointment	93.5 days	Û	50 - 60 days	65 days - (2338/36)	86 days - (2333/27)	42 days - (873/21)	39 days - (945/24)	51 days - (1911/37)	75 days - (1427/19)	81 days - (1873/23)	60 days - (1875/31)
CBRF	QUALITY	Patient kept their outpatient appointment, if applicable	95.7%	Û	90 - 95%	100.0%	91% - (20/22)	94.1% - (16/17)	89.5% - (17/19)	93.7% - (15/16)	93.7% - (15/16)	94.1% - (16/17)	95.2% - (20/21)
CBRF	QUALITY	% of clients connected to a PCP within 7 days of admission	/	- ①	90 - 95%	100.0%	100.0%	100.0%	100.0%	100.0%	100% - (10/10)	100% - (14/14)	100% - (15/15)
CBRF	COMMUNITY	% of eligible patients are admitted within 24 hours	86.7%	ء ۲	90 - 95%	92.3% - (12/13)	100% - (11/11)	100% - (11/11)	75% - (9/12)	83.3% - (5/6)	100% - (10/10)	100% - (14/14)	93.3% - (14/15)
ммт	QUALITY	Successful completion rate	59.8%	ں ۲	70 - 75%	87.5%	68.4%	70.6%	62.1%	65.0%	71.4%	72.2%	60.9%
ММТ	COMMUNITY	Compliance rate with discharge plan 60 days post-discharge	74.8%	۔ ۲	70 - 75%	57.1% - (8/14)	61% (11/18)	63.2% - (12/19)	52.6% - (10/19)	55.0% - (11/20)	44.4% - (8/18)	LAG	LAG
CRISIS SERVICES	QUALITY	Court Liaison [Linkage & Follow-up] % of settlement agreements and commitments	74.8%	ت ۲	80 - 85%	84.0%	83.0%	85.0%	56.0%	85.7%	86.4%	74.2%	90.0%
CRISIS SERVICES	COMMUNITY	extended Mobile Crisis: Ratio of voluntary to involuntary commitments	1.64 to 1	ت ۲	1.60 - 1.70 to 1	1.82 to 1	2.00 to 1	2.22 to 1	1.81 to 1	1.59 to 1	3.02 to 1	1.72 to 1	1.88 to 1
CRISIS SERVICES	COMMUNITY	Mobile Crisis: % of crisis assessments with documented linkage and follow- up within	25.3%	۔ ۲	40 - 50%	34.4%	38.5%	47.3%	56.3%	62.9%	57.9%	56.4%	55.9%
CRISIS SERVICES	COMMUNITY	24 hours of service Youth Crisis: % of crisis assessments with documented linkage and follow- up within 72	39.5%	ں ک	40 - 50%	43.0%	51.5%	58.8%	61.0%	60.3%	63.8%	65.8%	58.1%
CRISIS SERVICES	COMMUNITY	hours of service Court Liaison [Linkage & Follow-up] Compliance rate with court liaison policy	94.1%	ت ۲	90 - 95%	100.0%	100.0%	100.0%	100.0%	100.0%	94.1%	100.0%	100.0%
		Court Liaison [Linkage & Follow-up] % of individuals with commitments and settlement											
CRISIS SERVICES	COMMUNITY	agreements enrolled in CCS or CSP programs for eligible individuals within 60 days of referral (***FROM COMMUNITY TREATMENT)	79.2%	Û	95 - 100%	100% - (4/4)	100% - (4/4)	62.5% - (5/8)	33.3% - (1/3)	81.8% - (9/11)	100% - (10/10)	50% - (4/8)	75.0% - (3/4)
CRISIS SERVICES	QUALITY	Youth Crisis: Reduction in the number of diversion and length of stay for out of county diversions of adolescents (13-17 years old)	14.5 Diversions (6.3 days)	Û	12 - 13 Diversions (5 days)	15 Diversions (5.5 days)	21 Diversions (10.1 days)	22 Diversions (9.4 days)	11 Diversions (7.8 days)	9 Diversions (8.0 days)	11 Diversions (5.9 days)	7 Diversions (12.1 days)	11 Diversions (6.6 days)
CRISIS SERVICES	QUALITY	Youth Crisis: avoid diversions of less than 72 hours.	24.0%	Û	15 - 20%	0.0%	5.0%	0.0%	18.0%	33.3%	0.0%	0.0%	0.0%
INPATIENT BHS	QUALITY	% of NCHC Hospital patients with a post discharge counseling appointment within 4 days of discharge	88.6%	Û	90 - 95%	97.5%	92.7%	87.2%	61.3%	83.3%	77.8%	52.5%	50.0%
INPATIENT BHS	QUALITY	% of NCHC Hospital patients with a post discharge psychiatry appointment within 14 days of discharge	94.6%	€	90 - 95%	89.0%	90.9%	100.0%	98.0%	93.2%	84.6%	75.0%	92.3%
INPATIENT BHS	QUALITY	Detox: Length since previous admission	252 days	Û	250 - 260 days	195.1 days	313.0 days	250.9 days	258.4 days	269.0 days	269.0 days	246.4 days	212.8 days
INPATIENT BHS	QUALITY	DETOX: % of Detox patients admitted to substance abuse programming within 4 days of discharge	45.5%	Û	45 - 50%	36.0%	85.7%	33.3%	69.2%	73.1%	87.5%	66.7%	75.0%
INPATIENT BHS	COMMUNITY	Ratio of patient days served at NCHC vs. Out of County placements	2.2 to 1	Û	2.0 - 2.2 to 1	1 to 1.03	1.02 to 1	1.09 to 1	1.58 to 1	1.70 to 1	1.00 to 1	1.15 to 1	1.04 to 1
OUTPATIENT SERVICES	QUALITY	% of patients that have a post-discharge psychiatry appointment within 14 days of discharge	94.6%	Û	90 - 95%	89.0%	90.9%	100.0%	98.0%	93.2%	84.6%	75.0%	92.3%
OUTPATIENT SERVICES	QUALITY	Day Treatment: Successful completion rate	49.4%	Û	50 - 55%	67.0%	50.0%	60.0%	62.5%	50.0%	100.0%	33.3%	50.0%
OUTPATIENT SERVICES	QUALITY	OWI Recidivism Rate	24.1%	Û	25%	26.9%	19.3%	12.9%	19.2%	17.1%	27.3%	17.4%	0.0%
OUTPATIENT SERVICES	QUALITY	% of NCHC BHS Hospital patients with counseling/ post-discharge check visit established within 4 days following discharge	88.6%	Û	90 - 95%	87.5%	92.7%	87.2%	61.3%	83.3%	77.8%	52.5%	50.0%
OUTPATIENT SERVICES	COMMUNITY	% of patients offered an appointment within 4 days of screening by a referral coordinator	90.4%	Û	90 - 95%	97.5%	97.8%	97.2%	84.7%	98.0%	52.0%	65.6%	60.0%
OUTPATIENT SERVICES	COMMUNITY	Criminal Justice Post-Jail Release Access Rate	96.6%	Û	90 - 95%	100.0%	97.8%	95.3%	88.5%	100.0%	79.2%	67.3%	66.7%
OUTPATIENT SERVICES	COMMUNITY	Average number of days from referral to starting day treatment	18.3 days	Û	10 - 12 days	14 days	4 days	17 days	11 days	4 days	1.3 Days	6 days	7.6 days
OUTPATIENT SERVICES	COMMUNITY	Hospitalization rate of active patients	2.2%	Û	8 - 10%	1.5%	1.9%	1.7%	1.8%	1.9%	2.3%	1.8%	2.3%
OUTPATIENT SERVICES	COMMUNITY	Same day cancellation and no-show rate	12.5%	₽	8 - 10%	13.7%	16.7%	12.3%	12.4%	11.3%	11.0%	13.9%	11.5%
ADULT PROTECTIVE SERVICES	QUALITY	% Of At Risk Investigations closed within 30 days	65.3%	Û	70 - 75%	68.0%	64.0%	68.9% - (22/32)	64.4% - (29/45)	58.5% - (31/53)	66.7% - (28/42)	77.3% - (58/75)	62.2% - (23/37)
ADULT PROTECTIVE SERVICES	QUALITY	% Of Risk Case Opened within 1 month of closure	3.5%	Û	5% or below	4.0%	4.0%	8.5% - (4/47)	8.2% - (4/49)	8.9% - (4/45)	5.1% - (2/39)	1.6% - (1/61)	6.9% - (2/29)