**MILWAUKEE COUNTY MENTAL HEALTH BOARD**
**QUALITY COMMITTEE**

**March 6, 2017 - 10:00 A.M.**
Milwaukee County Mental Health Complex
Conference Room 1045

**MINUTES**

**PRESENT:** Robert Chayer and Mary Neubauer
**EXCUSED:** Ronald Diamond, Rachel Forman, Jeffrey Miller, and Brenda Wesley

**SCHEDULED ITEMS:**

1. **Welcome.**
   Chairwoman Neubauer introduced herself as the new Chairperson for the Mental Health Board Quality Committee and welcomed everyone to the March 6, 2017, meeting.

2. **Key Performance Indicators (KPI) Updates and Analysis.**
   The dashboard provided continues to evolve. There will be additional quality measures as ways to enhance the dashboard are considered. Based on recommendations from previous meetings, changes were incorporated, are reflected, and were explained.

3. **Behavioral Health Division System of Care: Enrollment and the Key Performance Indicators Dashboard Presentation.**
   A rationale and plan for transitioning the KPI to include identifying a more global, enrollment-based outcome was discussed. Emphasis was placed on focusing on patient-centered recovery performance indicators across service lines. Further information will be provided.

4. **Contract Performance Measures Development Process and Performance Improvement Process.**
   A process for measuring contract performance has been developed and includes identifying applicable quality measures and benchmarks; professional, client, and provider consultation; obtaining approval and implementing measures and benchmarks; examining results; obtaining feedback from clients and providers; and adjusting as necessary. The timeline for contract performance development was shared.
5. **Community Access to Recovery Services Quarterly Report and Referral Process Improvement Project.**

   The CARS quarterly report includes number of clients receiving services and by program, number of admissions and by program, referrals/intakes by access point, and average days on waitlists for mental health programs and AODA residential services.

   The goal of this project is to reduce the time from referral to admission by at least twenty-five percent. The time from referral to enrollment in services was reviewed. Redesign recommendations, next steps, and improvement opportunities were shared.

6. **Client Experience Workgroup.**

   The Client Experience Workgroup was assembled in June 2016 to evaluate the patient/client satisfaction survey process to ensure best practices. Assessments of current patient/client satisfaction survey tools, distribution and collection methods, data entry, analysis/reporting, client satisfaction survey targets, and timeliness of report creation were conducted. A decision was made to consult a third-party vendor to assist with developing an impartial and consistent client experience survey process.

   The Workgroup has been in discussions with the vendor, and plans to implement are underway.

7. **Compliments, Complaints, and Grievances.**

   The objective is to centralize collection of compliments, complaints, grievances, and appeals and implement an electronic tracking methodology to develop mechanisms to utilize client feedback data for service enhancement and improvement. The team explored electronic tools to assist in collecting and storing data. Verge was selected, with input from the Information Management Services Division (IMSD), as the program that best fits the needs of the Behavioral Health Division and is now live. Verge’s Safety Suite offers both patient relations and incident reporting modules. The team is in the process of reviewing user feedback.

8. **Seclusion and Restraint (S&R) Reduction Initiatives Progress to Date.**

   There has been significant progress made, with work continuing in the areas of documentation, process, and review. Federal surveyors have returned several times since the original citation was issued. A checklist has been created and is to be completed whenever seclusion and restraint is used. Usage rates continue to decrease. Further work on treatment plan documentation is indicated.
9. **Wraparound Milwaukee Performance Based Measures.**

Wraparound has tracked the outcomes of established performance measures for contracted Care Coordination services. As programs evolved and expanded, performance measures for new areas were necessary, some of which are still being developed. Performance is measured every six months and is reflected in an agency performance report. Agency improvement plans are created to assist agencies in meeting performance measures.

10. **Psychiatric Crisis Services (PCS) Hospital Transfer Waitlist Report.**

One of the challenges faced in the last quarter of 2016 was related to staffing. Data representative of individuals who are on emergency detention but not medically stable to be transferred to the list is embedded in the data.

Questions and comments ensued.

11. **Environment of Care 2016 Annual Report and 2017 Goals.**

Written plans for managing environmental risk, which include safety, security, clinical and non-clinical equipment, handling of hazardous materials, fire prevention, and utility systems, together make up the Behavioral Health Division Environment of Care Program.

Achievements for 2016 and goals for 2017 were highlighted.

Questions and comments ensued.

The Quality Committee unanimously agreed to recommend approval of the plans and the annual report to the Board.

12. **Next Scheduled Meeting Dates.**

- June 5, 2017, at 10:00 a.m.
- September 11, 2017 at 10:00 a.m.

The next meeting date was announced as June 5, 2017, at 10:00 a.m.

13. **Adjournment.**

Chairwoman Neubauer ordered the meeting adjourned.
This meeting was recorded. The official copy of these minutes and subject reports, along with the audio recording of this meeting, is available on the Milwaukee County Behavioral Health Division/Mental Health Board web page.

Length of meeting: 10:03 a.m. to 12:04 p.m.

Adjourned,

Jodi Mapp
Senior Executive Assistant
Milwaukee County Mental Health Board

The next regular meeting for the Milwaukee County Mental Health Board Quality Committee is Monday, June 5, 2017, @ 10:00 a.m.