SCHEDULED ITEMS:

1. Welcome.

Chairman Chayer welcomed everyone to the June 6, 2016, Mental Health Board Quality Committee meeting.

2. Five Year Analysis of Workers’ Compensation Claims and Liabilities.

The basic principles of risk management consist of identifying all organizational exposures, analyzing these risks, controlling liabilities through a risk mitigation plan, and continually monitoring the plan for effectiveness. Workers’ compensation claims are statutory wage and medical benefits for employees of Milwaukee County to compensate for injuries that occur in the course and scope of their employment. The claims handling model has transitioned from self-administration to a third party administrator. This new initiative introduced new and valuable resources for County employees.

Of all the departments in the County, the Behavioral Health Division (BHD) experienced the most dramatic improvements in claims experience in 2015, with a 74% decrease in frequency measures compared to their previous averages. In a related trend, BHD severity measures dropped 70%. Improvements in the claim experience at BHD are attributed to the new claims handling resources offered County-wide, the ability to adjust claims under State law wage guidelines and outside of County Ordinance, department specific operational initiatives, and concerted efforts to focus on security and safety issues.


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. In 2015, major improvements were made in the area of building security and installing an emergency back-up generator.

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

   - Community Access to Recovery Services (CARS) Quarterly Report and Key Performance Indicators Dashboard Summary

CARS has redesigned their quarterly report to include more data/programs and presents a more comprehensive picture of services available. Notable achievements include Comprehensive Community Services enrollment is up 17% from 2015 and Targeted Case Management and Community Support Programs both provided services to a greater number of clients in the first quarter of 2016 than in any quarter in 2015.

The transition from the medical records system CMHC to Avatar was discussed. The old system contains the intake data, and the new system contains the follow-up data. The identification numbers are not necessarily the same in both systems. With implementation of anything new, glitches are revealed and addressed. For clarification, inconsistencies are due to the transition and not the data.

The change to Avatar has generated additional important information. This is the first quarter where discharge data by program has been captured. The new system has the ability to do so much more than what the old data system allows; particularly, when it comes to measuring performance by agency. It has required training on behalf of the provider to learn to correctly enter data.

It was conveyed that what is being reported on the Dashboard, as it relates to performance measures, is just a fraction of the data being collected, evaluated, and scrutinized. The Dashboard reflects information staff feels is the most important. If the Committee would like other data elements included, staff will adjust the format of what is currently being provided.

Questions and comments ensued.


An executive summary was provided of the report detailing the total number of youth served, average cost per member/per month, improvement of functioning levels, overall family and youth satisfaction with care coordination and provider network services, top mental health services utilized, complaints, provider network makeup, affiliated programs, the child and adolescent Mobile Urgent Treatment Team, and the Wellness Clinic.

Questions and comments ensued.
6. **Annual Behavioral Health Division Sentinel Event Presentation.**

   In 2015, nine Sentinel Events were reviewed by a newly restructured Sentinel Event Committee. The restructuring included changes to policy and process. Data now reviewed, as a result of restructuring and as opposed to what was analyzed by the Committee prior to, was discussed in detail. The Committee is in the process of merging Wraparound’s Sentinel Event review process into the Committee’s overall review of Sentinel Events occurring at the Behavioral Health Division as a whole.

   Questions and comments ensued.

7. **Use of Consent Agenda for Standing Quality Reports.**

   Staff recommended Consent Agendas be used to address standing Committee reports. They would be submitted in advance giving individuals the ability to single out specific items for discussion and move the items recommended for approval forward in block. This will allow for more time to focus on and discuss the important/critical issues. Moving to this format would allow for deeper conversation about the important issues.

   Chairman Chayer indicated the staff request would be considered.

8. **Next Scheduled Meeting Dates:**

   - September 12, 2016, at 10:00 a.m.
   - December 5, 2016, at 10:00 a.m.

   The next meeting date was announced as September 12, 2016, at 10:00 a.m.

9. **Adjournment.**

   Chairman Chayer ordered the meeting adjourned.

This meeting was recorded. The aforementioned agenda items were not necessarily considered in agenda order. 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: 10:05 a.m. to 11:25 p.m.

Adjourned,

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**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, September 12, 2016, @ 10:00 a.m.