**Central Wisconsin Health Partnership**

**Comprehensive Community Services Regional Coordinating Committee**

**Quality Improvement Committee**

Tuesday, June 30th, 2015

**Present:** Joann Stephens – Stable Life; Erika Dorrintgon and JoAnn Geiger – Juneau County; Rick Immler, Dan Naylor, and Lori Martin – White Pine Consulting; Phil Robinson, LeRoy Dissing, and Jennifer Smet – Green Lake County.

1. **Introductions**
	1. Share your purpose / interest for involvement on the committee
		* Meaningful outcomes
		* Information that is useful to participants, providers, and community
		* Use of preferred practices and evidence-based practices – find a balance as to maintain flexibility and remain person-centered
		* Partnership between providers, consumers, and data
		* Effective use of available resources
		* Decisions driven by quality data
		* Include consumers in decision-making
		* Look at current processes – make more effective
		* Less paperwork
		* Use of both qualitative and quantitative methods of sharing data – outcomes/numbers, financial savings, and personal stories
		* Data has to tell a story – what is the story we have to tell?
		* Data should be transparent and accessible
	2. Issues basket: what would you like to see as a focus, or what questions would you like answered?
		* Data is only as good as the questions asked – values, guiding practices, requirements
		* Vision –
			+ Innovation, growing, willingness to change and improve
			+ Model for other sites
			+ Green house for the mind – growing developmental assets; focus on community, not just agency; balance what we do and how we do it
		* Take risks – continue to grow
		* What do we currently have – baseline. What is the quality? Do we need to collect more?
		* What is the state looking for? It may be up to us to inform the state of what would be useful.
		* Quality data – reliability, validity
		* Adequate and consistent training
			+ Regional PPS training
			+ Functional screen
			+ Administration of the ROSI and MHSIP
			+ CANS
2. **Meeting guidelines**
* Committee adopted the meeting guidelines of the Training Committee which include:
	+ - Mute cell phones
		- One person talks at a time and others listen
		- Open dialogue
		- Respectful, equal value/voice
		- Start and end on time
		- Periodic self-evaluation – how are we doing?
1. **Review current membership**
	* Dr. Laura Blakeslee, evaluator with the Division of Mental Health and Substance Abuse Services is interested in our committee’s efforts. Her colleague, Mike Quirke also offered his support in the area of NIATx.
	* Suggestion to add someone who could represent data entry – ask Regional Coordinating Committee for suggestions
2. **Role / purpose of the committee**
* DHS 36 – group was asked to review for discussion at our next meeting
* Regional Quality Improvement Plan Policy – group was asked to review for discussion at our next meeting
* What does the group want to accomplish?
1. **Next steps**
* Needs assessment – what information do we already have available?
* Collect ROSI and MHSIP data from partnering counties
* Engage health care systems – what is the experience of providers? Data?
	+ Phil and Rick will draft an introductory letter
* Pull data from the Program Participation System (PPS)
* MA database
	+ Who the consumers are
	+ Expenditures – both physical and mental health
	+ Two baselines – certified CCS counties and non-certified counties