



Wisconsin Recovery Implementation Task Force • 1 West Wilson Street, Room 951 • PO Box 7851 • Madison, WI 53707-7852

Recovery Implementation Task Force Program Review & Quality Enhancement Committee

Friday, November 17, 2017

1:45-3:20pm

Prairie Oak State Office Building
Department of Agriculture, Trade, and Consumer Protection
2811 Agriculture Drive
Madison, WI 53718

Minutes

Attendance- Chris Keenan, Joann Stephens, Danielle Graham-Heine, Megan Sulikowski, Joan Sternwies, Alice Pauser, Shelly Monroe, Val Neff, Lalena Lampe, Rose Barber

The group discussed the Role of the chair / co – chair

- Attend 1 hour executive committee phone call meeting
- Review and develop agenda and review notes
- Assign tasks
- Reviewed roles and tasks of the chair/co-chair
- Moved to recommend a tri-chair
 - Val N, Chris, and Rose

Elected to be Co-Chairs of the Committee are Chris Keenan and Val Neff

- Discussion of the role of the committee
 - What is the focus of the committee and where the group will go
 - Begin to move towards the process of Program Review and the Quality Enhancement -

- Program Review –
 - Overview of CCS, CSP, and CRS as the large workgroup education
 - Committee will review data related to psychosocial rehab services
 - Could potentially look at CCS, CSP, and CRS (draft reports) and/or needs assessment
 - Review consumer satisfaction surveys
 - Review Peer Support Survey utilization
 - Quality Enhancement
 - Review and identify evidenced based practices and fidelity
 - Identify programs throughout the state and review program
 - Determine best practices
 - First meetings
 - focus on the data and having the ability to understand the data collected
 - Things to think about and areas of focus
 - Survey reviews
 - Medicaid rules and utilization of Medicaid
 - DHS 75
 - Utilization of Peer Supports / Peer Specialist
 - What is meaningful technical assistance between County/Tribes provided by the State

Focus

- Review and provide feedback to DCTS regarding programs and administrative rules from a consumer perspective to support fidelity and quality of care within a County and Tribes to those services across the lifespan. Review and advise BPTR administrative rule (and policy) creation and changes in order to ensure these are *service participant informed* (recovery focused, strengths-based, person centered, trauma informed, inclusive, and embody shared-decision making). An example of this would be the review of the new psychosocial rehabilitation rule (PSR) with the whole RITF and as a subcommittee of the RITF, further examination of data around the current programs the rule will encompass.
- Identifying gaps in programing, traditional programing, and rural outreach. Provide direction and support to any efforts aimed to increase the state and tribal-wide availability of quality, high-fidelity, evidence-based services and practices for service participants across the lifespan. For example, train peers/CPSs to understand what *service participant informed* entails in a high fidelity program and further empower them by providing them with a means to either 1) hold the services and practices they evaluate accountable when offering low fidelity services or 2) recognize and reward these services or practices for having high fidelity practices
- Identifying new, developing, and existing programs to ensure that administrative rules or upcoming rules support the care and treatment of individuals. Identify promising or effective initiatives and practices within Wisconsin's counties and tribes and provide direction and support to ensure sustainability and expansion across Wisconsin's counties and tribes. Examples may include county examples of integration of criminal justices and mental health systems or the Coordinated Specialty Care/Early Intervention First Episode Psychosis program.

- January focus
 - Review data provided from DCTS

*** Description of the 3 programs, differences of the programs, and moving forward with PSR and how will this look different and support consumers and families.