



## Dane County Department of Human Services Division of Adult Community Services

---

Dane County Executive – Joe Parisi  
Director – Shawn Tessmann  
Division Administrator – Todd Campbell

1202 Northport Drive, Madison, WI 53704-2092  
PHONE: (608) 242-6200 FAX: (608) 242-6294

### CCS Coordination Committee Minutes

Zoom Virtual Meeting (Due to COVID-19 precautions)

January 19, 2022

12:00-1:30 p.m.

Present: Laura Abilene, Teri Barman, Andi Galka, Nikyra McCann, Veronica McMurray, Mary Boesel Rauwolf, Margarita Rubio, Heidi Stringer, Julie Meister (chair)

Present (non-members): Niki Sustr, Jenna Ramaker

1. Public comment time (5 min/speaker up to 15 minutes total allocation) **No public comment.**
2. Comments about, or corrections to 11/17/2021 minutes.
  - a. Approval of minutes **All voted in favor, minutes approved.**
3. Progress update (as of 1/18/22)
  - a. CCS enrollment update 1952 total participants enrolled, (up 67 since 11/15/2021)
    - i. Adults = 1503 (up 42)
    - ii. Youth = 449 (up 25)
    - iii. Discharges = 1035 total since program began in 2015 (up 140 since 11/15/21)
      - 2021 average discharges: Q1=17/month, Q2=21/month, Q3=36/month, Q4=28/month
  - b. Dane County CCS personnel update
    - i. Bilingual Spanish Case Manager: Continuing to recruit.
    - ii. 2 Social Worker (Intake Worker): internal recruitment
    - iii. 1 QA Specialist – soon to be posted externally
    - iv. 1 Social Work Supervisor – soon to be posted externally
4. Annual Consumer Satisfaction Survey—review survey results (Jenna)
  - a. **Required by the State of Wisconsin to be administered annually**
  - b. **Goal: to assess participant experiences in the CCS program**
  - c. **Three types of surveys:**
    - i. **Adult 18+**
    - ii. **Youth: ages 13-17**
    - iii. **Family: Sent to parent/guardian of CCS participants age 12 and under**
  - d. **Response rate was 16%- anonymously returned, limits follow-up to increase response rate**

- e. **Administered via combination of postal mail and secure email.**
- f. **\$5 incentive gift card for completing survey.**
- g. **Preferred Languages: Surveys were sent out in Cambodian, Spanish, Hmong, and English based on the preferred language of the CCS participant.**
  - i. **13 Cambodian Surveys**
  - ii. **14 Spanish Surveys**
  - iii. **45 Hmong Surveys**
  - iv. **2 (Laotian) English via Service Facilitator**
- h. **Respondents mirrored the eligible population on race, gender, and age.**
- i. **Respondents did not mirror the eligible population for racial ethnic category: participants who identify as white were over-represented and participants that identify as Black were under-represented.**
- j. **Each survey was coded to match the service facilitation agency providing services-- this allows us to provide agency-specific feedback regarding strengths and areas for improvement.**
- k. **Adult response results:**
  - i. **208 adults completed the survey- 85% positive experience**
    - a. **Andi Galka- it would be interesting to see how the 2019 survey results were before COVID with this specific category.**
  - ii. **Summary of comments from adult surveys:**
    - 1. **Experiences that help recovery:**
      - a. **General satisfaction**
      - b. **CCS staff helpful, supportive**
      - c. **Helpful services**
      - d. **Particular agency or person**
      - e. **SF- advocacy/helps navigate services**
      - f. **Feelings of hope/progress**
      - g. **CCS team**
    - 2. **Experiences that hinder recovery:**
      - a. **Not receiving services desired**
      - b. **Agency/provider specific issues**
      - c. **SF issue/not feeling advocated for**
      - d. **Poor communication**
      - e. **Psychiatry shortage**
      - f. **Lack of progress**
      - g. **Personal barriers**
      - h. **Lack of social networks**
      - i. **COVID- staying positive**
- l. **Youth response results:**
  - i. **34 youth completed the survey- 85% positive experience**
- m. **Family response results:**
  - i. **19 family completed the survey- 90% positive experience**
- n. **Positive comment experiences:**
  - i. **"My child has an excellent team right now and they have been very supportive during these trying times"**
  - ii. **"We finally have an amazing team who will change approaches as needed to better meet my child's complex needs"**
- o. **Areas for improvement:**
  - 1. **"Virtual appointments do not work for my child and what has been our only option for way too long"**

- p. **Comments regarding the surveys:**
- i. ***Mary Boesel Rauwolf- It would have been hard for me to do on my phone/on the computer. This should be put into consideration. With the coding, are there improvement plans if you see one agency needs more improvements than the other? Is there a plan?***
  - ii. ***Andi Galka- As a supervisor, feedback is helpful.***
  - iii. ***Nikyra McCann- Although the response rate was lower than normal, it was good to see the positive experience percentage***
  - iv. ***Veronica McMurray- I would rather have it in paper via mail, I receive too many emails that need passwords due to encryption. I ignore it because I have to put in password.***
  - v. ***Teri Ann Barman- I prefer paper version. The encryption part was fine for me, then I received something in the mail and I was confused about which one I did/didn't do. I prefer the paper version so I know I sat down and physically did it.***
  - vi. ***Mary Boesel Rauwolf- I live in a rural area my emails often do not go through due to my reception. If I received emails reminding me about the survey, I wouldn't know if it went through. Paper is the way I would prefer.***
  - vii. ***Heidi Stringer- I think taking a closer look at telehealth services in these participant and provider surveys would be useful. I think it would be cool to do best of both worlds. Track who are able to do either versions of the survey, or even using a barcode system that would correspond with the email with the given survey***
- q. ***Julie Meister- Jenna and I will talk through the challenges with the 2021 surveys and bring ideas for improvement to the Coordination Committee for review and recommendation to improve the process for 2022.***

5. CCS Quality Improvement Plan: Goal setting for 2022

- a. ***Goal #1-***
- i. ***Add telehealth question to 2022 survey to assess participants' satisfaction with method of service delivery (in person vs. telehealth).***
  - ii. ***Review method of survey administration and alter, if needed, to improve response rate. Goal is over 20%.***
  - iii. ***Review gift card incentive options with Coordination Committee to determine most useful/desirable for largest number of participants.***
    - 1. ***We will bring an approved vendors list to have the committee weigh in on which place to use for the gift cards***
- b. ***Goal #2- Future hiring- were in a really good spot currently. The intake workers are doing great.***
- c. ***Goal #3- We are now able to pull specific personnel information regarding bilingual capability onto the CCS Provider Directory to provide accurate bilingual services offered.***
- d. ***Goal #4- Service Director meetings are incredibly helpful to ensure providers have timely access to information and ability to provide feedback.***
- e. ***Goal #5- Dane CCS has seen an increase in CCS prescribers over the last year. We will be working with the State to eliminate barriers to APNPs prescribing within CCS program.***
- i. ***Mary Boesel Rauwolf: some primary care clinics are significantly used for medication assisted treatment (MAT).***

1. ***Laura Abilene: I hope Trauma Informed Care becomes more popular, it will be standard for everyone.***
  - f. ***Goal #6- During COVID, we were unsure on how the job market and job placements were impacted. Should we resurrect this goal for 2022? Given the different variants/strains, Jenna and I can get you the data for 2022. We should either move forward with the data collection or get rid of it completely.***
    - i. ***Teri Ann Barman: Can we keep it for another year, while we become more grounded? We should collect the data for this year, it would be beneficial.***
      1. ***Mary Boesel Rauwolf: I think it would be interesting to see how and if their employment needs are being met.***
6. Items for March and future meetings:
  - a. ***Goal #7 and #8 we will review in March and finalize QI plan.***
7. Completion of timesheets.
  - a. Julie will email timesheets to those that need them to review. Either sign electronically with Adobe Acrobat or send email back to Julie confirming that you agree with time sheet (counts as your signature) and Julie will submit to payroll.

### **Next Meeting**

**3/16/22, 12:00-1:30pm**

**Zoom Virtual Meeting (due to COVID-19 precautions)**