

**Waukesha County Human Services Center
Mental Health Advisory Committee (MHAC) Meeting
June 18, 2018**

Present MHAC Committee: Danielle Birdeau (on behalf of Kelly Simms), Colleen Gonzales, Jessica Grzybowski, Mary Lodes, Mary Madden, Shannon Stydahar, Marybeth VanderMale

Absent MHAC Committee: Linda Cole, Terry Findley, Cathy Friend, Kathy Mack, Maura McMahon, Helen Prozeller, Kelly Simms

HHS Liaisons: Brad Haas, Joan Sternweis

Guests: Katie Miller

1. Call to Order

Chair Gonzalez called the meeting to order at 1:39 p.m. Introductions were exchanged among the committee members and guests.

2. Review and Approval of Minutes

Committee members stated that the following changes should be made:

- Lisa Hoefler's name is spelled wrong
- CCS members should be listed separately
- Madden and Simms should be listed under both MHAC and CCS

Motion: Lodes moved, second by Madden, to approve the Mental Health Advisory Committee minutes, as amended, of May 21, 2018. Motion passed unanimously.

3. Educational Presentation: Mental Health and the Court System – Shannon Stydahar, Wisconsin Department of Corrections

Stydahar gave a brief overview of the Waukesha County conditional release process. Conditional release is covered in state statute 971.17. When a plea for not guilty by reason of mental disease or defect (NGI) is entered into the court, the court has one to three medical or mental health professionals interview the client. A conditional release will be considered if the client is determined to have a mental health issue, and would be able to remain in the community without damage to themselves, others, or property.

When someone is sent to Mendota (men only) or Winnebago, they may petition the court for release every six months. The court will then order a supplementary mental health exam to determine if the release is appropriate. If the person withdraws their petition prior to completion, they may re-petition in less than six months. There are currently waitlists for both Mendota and Winnebago, so the Department of Corrections prefers to utilize conditional release.

DHS contracts with the DOC and community providers, such as Wisconsin Community Services (WCS) and Lutheran Social Services (LSS), to handle the case management side of conditional release. The case manager's sole purpose is to ensure that the client's mental health status

stays stable. Probation does not have a hold on if the client goes to doctor's appointments or takes their medications. Conditional release allows control of these areas.

When on conditional release, the client does not have access to firearms, it not able to receive early discharge, and there is no out-of-state travel without the court's approval. The travel ban is due to that other states may not recognize our conditional release, and therefore would not be required to extradite a client. If there is a violation, the case manager is able to place the client into custody, but only at the physical jail location. Case managers have three business days to notify the court if there is a violation, and the court has 30 days to respond regarding how to treat the violation.

At the time of discharge, there needs to be a determination as to if the client needs further commitment under a chapter process.

When a client goes to an institution on a conditional release, the sentencing court is where they will return for legal action; however, they will be supervised by the county where they are a resident.

Stydahar was not aware of any advocacy actions to update the non-politically correct terminology in state statutes. Madden added that when statutes are being updated, open meetings must be held, and that is when the advocacy people can speak up. Stydahar stated that internally, the terminology is changing.

4. HHS Staff Liaison Report – Brad Haas, Joan Sternweis

Haas reported that Comprehensive Community Services (CCS) has the Safe Survey tomorrow.

Haas commended the HHS Board requesting a presentation on the housing epidemic. He stated that this was a great sign based on the Prioritized (Unmet) Needs presentation that was presented earlier this year.

Sternweis reported that there will be divisional presentations to the HHS Board on July 12. The cost to continue current operations is far more than what HHS receives in tax levy increases.

The Prevention Drug Overdose (PDO) grant has money that will need to be spent for training before the end of August. Some of the funds will be used for hosting a peer specialist training, hopefully in August and again in September or October. While the second presentation would be past the deadline, this will be acceptable because the trainers will be paid and the dates will be secured prior to the deadline. The training would be the integrated training, which contains both mental health and substance use material.

5. Reports

a. HHS Board Liaison Report – Mary Lodes

Lodes stated that she was unable to attend the last meeting, but that she received a copy of the homeless report that was given by the Housing Action Coalition.

b. Comprehensive Community Services (CCS) Coordinating Committee – Kelly Simms

Birdeau reported that the state review from the Department of Quality Assurance will be occurring tomorrow. CCS is hoping for a 2-year recertification of the program.

CCS and Crisis will be cross-trained and working together. The programs will utilize the UW-Green Bay training partnership program that Waukesha County is a member of.

The crisis team continues to move along with operations. There are now 7 full-time employees and 13 limited-term employees.

The application has been submitted for the final year of the 5-year CCISY Grant. Since 2015, services to those aged 5 years to 25 years has increased 38%.

c. Coordinated Services Team – Kelly Simms

No report.

c. Peer Specialist Committee of Waukesha County – Cathy Friend

No report.

d. Community Health Improvement Planning Process (CHIPP) Report – Mary Madden

Madden stated that finishing touches are being applied to the logic model for the mental health subgroup, which will focus on system navigation, recovery, wellbeing, not enough knowledge. The Zero Suicide training will be later this week. The group will then do a practice run-through on Monday, and the final presentation to the community is July 17.

e. Suicide Task Force – Mary Madden

Madden reported they are looking to bring a cross-sector group of participants into the task force, which is following the CHIPP Initiative. There will also be a one-day conference coming up.

Birdeau would like to track those who are making referrals through the trainings that they have attended.

6. Ongoing Business / Community Initiatives

The NAMI Walk is September 15.

NAMI had a successful green ribbon campaign, distributed over 3000 lapel pins and 100 large ribbons.

Professional collaboration is occurring with local hospitals that have psychiatric wards, meeting to discuss needs and issues that they are experiencing.

7. Agency Updates / Announcements

Gonzalez stated that there is a lot of construction occurring at WCTC, and mentioned that a future MHAC meeting could be held at WCTC. An early alert system that has been set up has allowed WCTC to be more progressive when addressing students with mental health needs in their classes.

8. New Business

Sternweis reminded members that, if they are unable to attend a meeting, they are to update McClain prior to the meeting.

9. Other

Next month, Birdeau, Madden, and Sternweis will give a Zero Suicide presentation.

10. Public Comment

No public comment.

11. Adjourn

Motion: Madden moved, second by Vandermale, to adjourn the meeting at 2:59 p.m. Motion carried unanimously.

Minutes respectfully submitted by Janelle McClain.

Minutes Were Approved: C. Aguiar

Date: 7-16-18