

Minutes of the Health and Human Services Board

Thursday, March 19, 2014

Chair Vitale called the meeting to order at 1:00 p.m.

Board Members Present: Citizen Members Joe Vitale (Chair), Lori Cronin, Sarah Justin, Dr. Steve Kulick, Mary Lodes, Tim Whitmore. Supervisors Janel Brandtjen, Duane Paulson, and Bill Zaborowski. **Absent:** Citizen Member Michael O'Brien, Supervisor Christine Howard.

Also Present: Health and Human Services Director Antwayne Robertson, Deputy Director Laura Kleber, Administrative Services Division Manager Randy Setzer, Clinical Services Division Manager Joan Sternweis, Human Services Supervisor John Kettler, Clinical Services Supervisor Danielle Birdeau, Mental Health Advisory Committee Chair Mary Madden, AODA Advisory Committee Chair Rose Barton, AODA Advisory Committee Co-Chair and AODA Volunteer Lou Hernandez, Mental Health Advisory Committee speakers Terry Findley and Helen Prozeller, and Mental Health Advisory Committee member Linda Cole.

A quorum was present and introductions were exchanged.

Announcements

Vitale shared information about the upcoming activities and encouraged board members to attend as schedule permits.

- March 26, 2015, 9:00 a.m. – 12:00 p.m., Public Health State 140 Review.
- April 2, 2015, 7:00 p.m., annual Health and Human Services Public Hearing, note location change to be held in Public Health division area at the Human Services Center, 514 Riverview Avenue.
- April 23, 2015, 10:00 a.m., HHS Board meeting to prepare for lunch meeting at 12:00 p.m. with new County Executive.

Alcohol and Other Drug Abuse Advisory Committee Needs Presentation

Barton shared a PowerPoint presentation on the unmet needs of the AODA Advisory Committee and combined recommendations with the Mental Health Advisory Committee. This year's focus is on the input of consumers, family members, and service providers as well as national and community trends to advise the HHS board on the unmet needs of citizens in Waukesha County. The needs will be accomplished through a combination of efforts by community agencies in partnership with Waukesha County. AODA unmet needs include:

1. Develop medically monitored opiate detox services with a case management component in Waukesha County. Individuals addicted to opiates need a safe place to detox locally with the establishment of a case management component. Individuals present themselves at emergency rooms in search of services and find that they are unable to be admitted. The committee is supportive of increased funding to stabilize current detox facilities and residential treatment programs. In addition, the committee would like to explore the

establishment of a detox facility in Waukesha County to serve its residents and possible surrounding counties.

2. Continue block grant funding to support AODA prevention programs. Continue to support the need for education to youth and families on how tobacco and alcohol use can be the gateway to harsher substances.
3. Support the Criminal Justice Collaborating Council in their proposal to continue the alcohol and drug treatment court programs. The AODA Advisory Committee supports the continuation to monitor caseloads and CJCC's plan to evaluate the need for additional resources if a wait list develops for this program.
4. Support funding needed to maintain the current level of funding for all existing programs. Maintain current level of funding for all existing programs and provide a 2% increase for all contracted residential facilities.

In addition to the above items, an upcoming threat to Waukesha County is abusive Methamphetamines. Pharmaceutical companies say we need to be vigilant as Adderall and Ritalin are what Oxycodone is to Heroin. A question and answer period followed.

In response to questions about item #1 above. The Lawrence Center was closed in 2008 because it was underutilized. The County was not looking at a Heroin crisis at that time. Opiate detox is not covered by insurance. In private pay insurance plans it is included in residential care services. Detox can be a pathway to start more intensive treatment. Kettler mentioned that a medically monitored facility is open in the Milwaukee region that Waukesha County would like to monitor, screen, and track the need before setting a dollar value to this item. Sternweis mentioned that in the Governor's budget there is a provision to add residential alcohol services to the Medicaid benefit. Additionally, the state is supporting the pilot of three centers in the northern part of Wisconsin, and Waukesha County is hopeful to have more data driven numbers available in the next three to six months.

In response to questions about item #3 above. Paulson mentioned that the Drug Treatment court is pretty well funded. Alcohol Treatment Court is a voluntary post conviction program that is currently below capacity, and would be something to alert the board about but not in the coming budget cycle. Barton noted that the intention of item #3 was meant to bring awareness only to the board.

Combined Recommendations (AODA and Mental Health Advisory Committee) include:

1. Access to Service – to continue and expand the ability to provide quality services and accessibility to services in a timely manner across the lifespan.
2. To continue the array of medications that are available to Waukesha County residents including medication assisted treatment for opiate users to enhance a proactive implementation of services.
3. To explore readily accessible resources to assist individuals with establishing healthcare insurance.

Mental Health Advisory Committee Needs Presentation

Madden is Chair of the Mental Health Advisory Committee and with her today is Certified Peer Specialist Terry Findley. Madden began by speaking about the Combined Recommendations (AODA and Mental Health Advisory Committee) which include:

1. Access to Service – to continue and expand the ability to provide quality services and accessibility to services in a timely manner across the lifespan. Psychiatry services are an essential part of treatment for individuals affected by mental illness and co-occurring disorders. Untreated mental health illness results in homelessness, incarceration, loss of life, etc. in the community. Evidence based research supports that ready access to services is vital to moving toward recovery. The second piece is associated with physical health care needs. As mental health individuals age, a medical or cognitive need may become vital to support community placement which can lead to a gap in services for mental health diagnoses and advanced deterioration in an individual's mental health. Consumers continue to identify transportation and child care as barriers when accessing services in order to maintain recovery.
2. To continue the array of medications that are available to Waukesha County residents including medication assisted treatment for opiate users to enhance a proactive implementation of services. Medications are an essential part of treatment for individuals affected by mental illness and co-occurring disorders. Ensuring ongoing access to necessary and appropriate medications ensures a proactive approach to the intervention for mental health and substance abuse services.
3. To explore readily accessible resources to assist individuals with establishing healthcare insurance. People are still confused by the Affordable Healthcare Act; lack of accessibility to sign up on a computer; lack of skills to access computer or concentrate on the paperwork can make it a daunting task.

In response to a question about item #1 above. Paulson questioned where are you expecting the grants to come from? Sternweis replied that Waukesha County will be utilizing a portion of the current multi-year crisis diversion grant and also a portion of the drug treatment federal enhancement grant application funding. No tax levy would be involved. Services in #1 above would be open access – for the outpatient clinic, Chief Psychiatrist and Addictionologist – for the Mental Health Center. Currently, the Mental Health Center is short one full-time psychiatrist.

Kulick questioned the barriers with navigating the health insurance market. What services are provided to people to assist them in navigating? Madden reported there are some resources in the community – St. Joe's, Waukesha Community Health Center – a benefit counselor, and the ADRC.

The Mental Health Advisory Committee (MHAC) Unmet Needs include:

1. To ensure that all contract agencies receive an increase to cover a cost of living adjustment and increase staff time for those contracted vendors that are managing the newly imposed documentation standards associated with Comprehensive Community Services (CCS), Community Recovery Services (CRS), and increased compliance monitoring.

2. Expand employment opportunities by .5 FTE for Certified Peer Specialists and provide one peer specialist course per year and ongoing continuing education opportunities. The priority will be to adopt a peer specialist training program that is integrated for mental health and co-occurring mental health and substance abuse.
3. Provide one 40 hour Crisis Intervention Training (CIT) for 30 patrol officers to include stipends paid to departments to cover department costs for sending personnel and incorporating a session to train patrol officers regarding the use of Narcan (Naloxone) for opiate overdose as well as issues specific to youth and young adults experiencing a psychiatric crisis. Full cost of the program is \$51,000 and includes 30 stipends at \$1,300 each that will get paid to departments for successful completion for each of their officers. Many officers attending CIT have been on the force as much as 20-30 years.
4. Optimize the opportunities the Governor's budget may bring to increase CCS services including those for children, and allocate all CCS revenue for continued delivery of mental health services. (Reinvest increased revenue to enhance and expand existing mental health programs.)
5. Identify opportunities and foster community collaboration to provide ongoing education and outreach regarding suicide, mental illness, and substance abuse issues across the lifespan.

Findley, a Certified Peer Specialist, spoke about the Comprehensive Community Services (CCS) program (Item #1 referenced above). He referenced the expansion of the Comprehensive Community Services program and what it means for Friendships Unlimited and other group homes. Friendships Unlimited is part of Waukesha County's service array. Since inception of CCS in 2005, the program has continued to grow, additional staff have been added, and educational requirements for CCS staff. Findley noted that any member of CCS who comes to Friendships for services needs to be included in documentation in order to be reimbursed by Waukesha County. In order to document you have to be a Certified Peer Specialist, and maintain 20 hours of continuing education every two years. Findley is involved in running groups down at Friendships on related topics of self-esteem, assertiveness, etc. He is also a certified Wellness Recovery Action Plan (WRAP) facilitator. Birdeau noted that Waukesha County is moving forward with recruiting younger Certified Peer Specialists to serve the transition youth population in our community. There are (7) Certified Peer Specialists at Friendships Unlimited and (5) at NAMI who work with the mental health and co-dependency population.

Prozeller commented on the Crisis Intervention Training (CIT), Item #3 reference above, and found it to be very informative and positive.

Supervisor Brandtjen asked for an environmental health update report soon.

MOTION: Brandtjen moved, seconded by Lodes to adjourn at 2:36 p.m.

Approved on 4-23-15.