BOARD OF SUPERVISORS

Brown County

305 E. WALNUT STREET
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Guy Zima, Chairman
Erik Hoyer, Vice Chairman

MENTAL HEALTH TREATMENT COMMITTEE: AD HOC
Wednesday, August 16, 2017
12:00 p.m.
Board Room, Aging & Disability Resource Center
300 South Adams Street
Green Bay, Wisconsin

****REVISED****

I. Call to Order.
II. Approve/Modify Agenda.
III. Approve/Modify Minutes of July 19, 2017.

1. Communication from Chair Zima and Judge Zuidmulder re: Have staff provide a breakdown and explanation of the expenditures made from the $1.15 million dollars allocated for mental health services during the County budget process for 2016 and 2017.

1a. Preliminary safe and stable housing study outcome – UWGB.

2. Update re: Long range mental health needs in Brown County including what could be funded by County Executive Streckenbach's proposed half-percent sales tax.

3. Discussion, review and possible action: Request that Brown County review its past and present mental health services and develop a more comprehensive plan to treat both short and long term mental health patients including but not limited to 1) alcohol and drug abuse detox and treatment; and 2) children, adolescent and adult mental health treatment.

4. Discussion, review and possible action: Request that the Human Services Director and Brown County Sheriff work together to develop a plan to provide a treatment plan for prisoners who presently make up a third of our jail population.

5. Discussion re: Recertifying County operations to return to previous services providing long-term care.

6. Update re: Outreach efforts.

7. Such other matters as authorized by law.

8. Adjourn.

Guy Zima, Chair

Notice is hereby given that action by Committee may be taken on any of the items which are described or listed in this agenda. Please take notice that it is possible additional members of the Board of Supervisors may attend this meeting, resulting in a majority or quorum of the Board of Supervisors. This may constitute a meeting of the Board of Supervisors for purposes of discussion and information gathering relative to this agenda.

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ADDITION TO MENTAL HEALTH AD HOC COMMITTEE AGENDA:

Wednesday, August 16, 2017 @ 12:00 p.m., Board Room, Aging and Disability Resource Center, 300 South Adams Street, Green Bay, Wisconsin.

#1a Preliminary safe and stable housing study outcome – UWGB.

News media notified by fax 08/14/2017.
Mental Health Ad Hoc Committee Members notified by email on 08/14/2017 and distributing at meeting on August 16, 2017.

PROCEEDINGS OF THE AD HOC
MENTAL HEALTH TREATMENT COMMITTEE

Pursuant to Section 19.84, Wis. Stats., notice is hereby given to the public that an Ad Hoc Committee of the County Board of Supervisors met regarding mental health treatment on Wednesday, July 19, 2017 in the Wellness Room of the Aging and Disability Resource Center, 300 South Adams Street, Green Bay, Wisconsin.

Present: Vice Chair Erik Hoyer, JOSHUA Representative Cheryl Weber, Citizen Representative Pat La Violette, Security Lieutenant Scott Brisbane, Green Bay Police Officer Kamra Allen, Health and Human Services Director Erik Pritzl, Behavioral Health Manager Ian Agar, Assistant Corporation Counsel Rebecca Lindner, Jim Crawford, other interested parties

Excused: Sheriff John Gossage, District Attorney David Lasee, Chair Guy Zima

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I. Call meeting to order.

The meeting was called to order by Vice Chair Hoyer at 12:01 pm.

II. Approve/modify agenda.

Motion made by Pat La Violette, seconded by Rebecca Lindner to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

III. Approve/Modify Minutes of June 21, 2017.

Motion made by Cheryl Weber, seconded by Pat La Violette to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

1. Communication from Chair Zima and Judge Zuidmulder re: Have staff provide a breakdown and explanation of the expenditures made from the $1.15 million dollars allocated for mental health services during the County budget process for 2016 and 2017.

Health and Human Services Director Erik Pritzl provided an update on the expenditures to date, a copy of which is attached. He informed that a little more than 50% of the spending that is available has been used to date. There are increases which caused Pritzl to project this out and he feels the end of year total may be double, if not more, than the $330,000. He noted that from January through May, 2017 $15,000 was spent on residential treatment, and then in June alone, there were charges of $12,000. Hoyer asked if there was any way to tell how many people this is helping. Pritzl said they track all expenses and some reports are monthly while others are quarterly. The quarter will be closed out in June and Human Services should receive updated data in July so a fuller, up to date picture can be presented at the next meeting.

Behavioral Health Manager Ian Agar explained that when people are referred to residential treatment, the placement is typically for 30 days. If the person needs continuing treatment after 30 days, they are moved to a less intensive form of treatment. Agar said last month seven people were treated at placements with contracted providers in Green Bay, Outagamie County and Fond du Lac. They place people where they can get the best match of the treatment needs of the person. What is nice about the contract model is that it gives Human Services the ability to better match the person with the program. Pritzl added that the CTC only has one type of program so if someone comes in with different needs such as a co-occurring program, they may need programming that is not included in the program model.

Hoyer asked if the people being served are typically uninsured or if they have insurance that can reimburse the County. Agar responded that sometimes people have insurance, but the co-pay is so high they cannot afford to enter treatment. In many instances, they do not anticipate recouping the funds, but if there is insurance, they will use it to pay for the services.

Jim Crawford asked if the CTC would need to staff up to provide the services that are currently being provided elsewhere. Agar responded that currently when someone is placed in residential treatment they are assigned a case manager whose main role is to track the person in the treatment program they are in to see how the person is doing and then when the person comes up for discharge, the case manager will verify that the discharge is

appropriate and make the appropriate linkage to services. The person may then transition from residential treatment to the intensive outpatient program which would extend the recovery out for at least six months to one year. Pritzl said we have increased from having a few people in residential treatment to seven being managed in different facilities and the number of people coming in that need to be assessed and authorized has also increased, but no staff has been added for any of this. Not only has the regular business increased, but this has added to it, which they want to see, but those already doing the work are being stretched almost as much as possible and this is one of the things the study being done by UWGB will look at. Hoyer asked if another staff person is needed, if a portion of the $1.15 million dollars may be able to cover it. Pritzl said ultimately it would be up to this committee to examine that and make some recommendations or support certain ideas around that concept and then forward it to the Human Services Committee for support and then it would go on to the full County Board.

Cheryl Weber asked if detox is working any better because it seems like a few more dollars are being spent there. Agar responded that anyone who is presenting is approved for detox. He said they are looking at doing a public service announcement which may make a difference in the volume being served and they are also looking at having a dedicated phone line people could call to check the availability and accessibility of services.

Pritzl noted that not everything got started at the same time in 2016, but it is interesting to note that as of June, 2017, more has been spent than was spent in the entire prior year. Day report center and mobile crisis are fairly static, but there have been increases in residential treatment and detox. Hoyer asked about reallocating funds and asked if there would be services available to expand the success in the package that has been created. Pritzl said the area to watch is the day report center. It started in November, 2016 and they are currently serving over 100 people. The numbers at the day report center are increasing and they feel their capacity is about 125. Pritzl said the day report center is not saying they are being pressured at this time and they are not turning people away, but this would be an area to watch if they start saying they cannot keep up with demand.

2. **Update re: Long range mental health needs in Brown County including what could be funded by County Executive Streckenbach's proposed half-percent sales tax.**

Pritzl recalled that a one-stop shop model at the CTC with medical clearance and long term consumer needs that are currently being provided in Trempealeau County would be the long range mental health needs of the County. He said we have to be sure that the ½% tax goes into effect before we get too far in to anything. Secondly, we need to see what the jail numbers comes back at. Hoyer said there has been a lot of head nodding amongst this group but we have not really formalized these two things we need to see. Pritzl feels Hoyer makes a good point and noted there were people in attendance at this meeting from UWGB who may have something to report at the August meeting that could be of interest. They are the ones who are completing the study and needs assessment of the people with substance abuse needs, mental health needs and housing needs and they may be able to come forward with a recommendation that talks about a capital project. The sales tax money is for capital projects, not operations. Pritzl said there are things he could look at operationally, but the sales tax money would not be available for that and he cautioned that we need to be mindful of being able to sustain operational costs when something is built.

Assistant Corporation Counsel Rebecca Lindner agreed that having a long term facility here as well as a one stop shop model at the CTC are the largest needs and would be most beneficial to the County.

Pat La Violette asked about the permanent transitional housing that has been discussed in the past. Pritzl said one of the original concepts was to change the CBRF unit of the CTC to transitional residential treatment but instead they went with the contracted providers to get an array of services. He also noted that the utilization of the CBRF has increased more with crisis stabilization. La Violette said she recently heard there may be a firm interested in putting up some sort of facility so people getting out of jail or treatment would have a permanent residence to go to with support services nearby and she feels this is something the community needs.

Jim Crawford spoke of a long term facility in Iowa he is familiar with that serves the needs of men, women and children who need constant nursing care. The facility provides a full range of activities with spacious grounds that the residents can walk around with supervision. There is also an area of small condo-type units and he feels this is something that is very needed in Brown County.

Judge Zuidmulder arrived at 12:25 pm.

3. **Discussion, review and possible action: Request that Brown County review its past and present mental health services and develop a more comprehensive plan to treat both short and long term mental health patients including but not limited to 1) alcohol and drug abuse detox and treatment; and 2) children, adolescent and adult mental health treatment.**

Pritzl provided a handout, a copy of which is attached which includes information regarding what is being spent and what would remain and if there are other things capacity-wise that are not being addressed. If there are other ideas anyone has, Pritzl would be happy to look at them. He went over the information contained in the handout regarding expanding re-entry services, enhanced crisis coordination and initiative coordination, expanding clinical intake services and modifying detoxification services.

With regard to the re-entry services, Hoyer asked if the jail liaison is having to refuse services to people or is just unable to give enough services to clients she does serve. Pritzl said the liaison is able to work with people to get them connected to services when they are released from jail, but the case management stops pretty quickly after discharge and there is not a lot of follow up after that. He also noted that the liaison works with people on a voluntary basis. The liaison talks to the inmates about their needs and then gets them connected with the appropriate resources and often makes appointments so the people can be connected to what they need immediately upon release. Judge Zuidmulder questioned what would be gained by having additional follow up because these people are working with the liaison voluntarily and cannot be compelled to do anything if they do not follow through. He questioned whether spending money expanding post-release contact would be wise. Agar responded that the current services being provided by the liaison and the fact that people are not re-presenting to the jail speaks to the efficacy of the work being done and it is felt that adding a position would bring the potential to serve more people in a like manner. If there is a greater volume of people being served, the number of people who do not re-present to the jail would increase. The cost to add a Clinical Social Worker position would be $87,935 annually.

Judge Zuidmulder said he would want to know if those that do not take advantage of the services of the liaison end up back in jail or just drop off the map. If they are coming back to the jail, he could see adding a position, but if they do not come back to the jail the question is what happens to those that do not take advantage of the services. Pritzl said they can look at this further, but he also said that not only is there the issue of not coming back to the jail, but we should also look at treatment retention and if these people are staying connected with their providers. It would also be beneficial to know if those that do not use the services of the liaison contact the Crisis Center or come in contact with the mental health officers at the GBPD.

Green Bay Police Officer Kamra Allen asked if the position being discussed would be to assist the jail liaison or Atalie in Health Services at the jail. It was indicated that it would expand the jail liaison position, but it would also be helpful to Atalie as well. Officer Allen felt it may be more beneficial to have the person working with Atalie because law enforcement sees a lot of people coming in and out of jail and officers will call Atalie to let her know someone is coming in that needs her services, but by the time Atalie gets the message and can get to them, they are already released. Allen feels it may be more beneficial for someone to be working with her to keep the same people from continuously going to jail because those are the people that are eventually convicted and serving a long time. Security Lieutenant Scott Brisbane noted that just because someone does not end up in the Brown County Jail after being released does not mean they are not in jail. It is common for people to leave the community and then end up in jail somewhere else.

Judge Zuidmulder said there seems to be a consensus that if this is an area where we can be effective, we would want to do something, but it seems like the concerns are we really need to have a good idea of what the person's assignment is to have good accountability to see whether or not spending money in this area is making a difference. He is hearing that there is a distinction between the sentenced inmates and the frequent fliers. He said he would be supportive of doing something to help the frequent fliers get the services they need, but he feels we need to keep looking at this. Agar said the frequent fliers are often missed, especially if they are in jail for the weekend only.

Brisbane noted that another mental health worker has been added to the jail. Hoyer asked if these types of issues are also discussed by the Criminal Justice Coordinating Board. He does not want to see a lot of overlapping discussions at different committees. Judge Zuidmulder responded that the Criminal Justice Coordinating Board is mainly focused on the jail expansion and overcrowding issue and they have not had much conversation about these issues.

Judge Zuidmulder continued that another of his concerns with regard to the jail issue is how people are ending up there. He noted the Crisis Center is the entry point and they make the decision as to if someone goes to jail or for other treatment. He said there is no ongoing accountability as to how those decisions are made, but the decisions have tremendous impact on what resources get used. Judge Zuidmulder continued that Crisis is a farmed out service and he has been concerned for a long time about what the criteria is when someone shows up at the Crisis Center in a psychotic circumstance and is then taken to jail. Brisbane said that usually the jail is told that jail is the safest person at that time because the jail can keep the person safe. Judge Zuidmulder feels this committee should talk about the criterion the Crisis Center should be using because the CTC is a safe place as well. He feels we are remiss when we deal with all this stuff at the top but we have no idea how the decisions are made to engage mental health services or law enforcement and in the end that dictates the whole thing. Judge Zuidmulder's opinion is that those decisions are not being made at a level of professionalism that we should be confident in on any given day. Pritzl said he could ask Crisis Center staff to attend a future meeting to talk about their assessment process, regulations, etc. Judge Zuidmulder said the Crisis Center has an economic interest in coming in and telling us they are doing a wonderful job. He would rather see their policy manuals so we can ask intelligent questions. It was suggested by Lindner that thought could also be given to sending out an RFP for crisis services. Judge Zuidmulder noted that Outagamie County has a public safety department of county employees and all of these things are administered in the same department at the same time with an agency that has a mission to do exactly what we are doing and they have had tremendous success with that model.

Hoyer asked if he should put in a communication at the County Board meeting to bring in representatives of the Crisis Center to be sure that they have policies and procedures and that they are following them. Pritzl said this is a highly regulated service, whether it is done by the County or by the Crisis Center. Chapter 51 has to be followed as well as DHS 34 along with all of the things that the Department of Health Services requires. The regulations are reviewed annually with onsite reviews and audits of cases. Judge Zuidmulder asked how any consistency can exist with the high turnover of staff at the Crisis Center.

Pritzl feels this discussion regarding crisis services is good and on point and all of the issues raised are very valid. As a Department, since this issue was first raised by the Public Safety Committee, they have spent a lot of time looking at crisis services and the contract and what the County is asking them to do and what they have said they will do to see how much of a match there is. Emergency detentions are the primary function of that organization in terms of the County's contract. A lot of the other work that is done, which may be crisis in nature, is not necessarily the mandated type of services we need to be sure are being done at a high level. He agreed with comments made earlier regarding doing an RFP and said it would take County Board approval to go through the RFP process and he does not know if that support is there at this time for various reasons. Judge Zuidmulder did not see any reason the Board would object to doing an RFP for services. Hoyer added that the Human Services Committee is taking a good long look at the contracts as well.

Pritzl also talked about enhanced crisis coordination and initiative coordination as referenced in the handout. He said this has been of concern to him since he took his position in Brown County. The question is is there adequate crisis coordination and is there someone tasked with coordinating the crisis system and chairing various committees and making sure the system players are all working together. At this time crisis coordination is pieced in a number of different positions. Many counties have dedicated crisis coordinators and Pritzl feels that is something we should look at here by creating that positon at a supervisory level and also pulling in the jail liaison and some of the other pieces that were added on to form the crisis core. The position would be responsible for crisis coordination and managing the contracts and outcomes, reporting and tracking. Pritzl does not think we are currently at the level we should be at in this regard. The annual cost to add this position would be $93,797.

Vice Chair Hoyer was excused at 12:49 pm.

Motion made by Rebecca Lindner, seconded by Pat La Violette to have Erik Pritzl take over the meeting at this time. Vote taken. <u>MOTION CARRIED UNANIMOUSLY</u>

Pritzl also talked about expanding clinical intake services as set forth in the handout and said that expanding the clinical intake services by adding a Clinical Social Worker position would have an estimated annual cost of $87,935. Judge Zuidmulder said the reservation he has with this is there has to be an ability to measure results. Everyone in government has been told for a very long time that they are supposed to be doing more with less and most are doing the best they can. If now we want to step up to the plate and say we went to spend the money for real service, to those in other sectors who continue to do more with less, there has to be accountability. If this is

something that is going to be done, there needs to be a clear definition of what is happening now and why it is happening and what they are supposed to impact so 12 months after the job is created, we can go back to why it was created and what we expected the job to produce and see whether it has happened. Otherwise, positions are created and we do not really know whether they are accomplishing what we are trying to do. Pritzl said one of the changes they have seen with regard to clinical intake is the ability to get people screened and assessed for appropriate programs and increase revenues and case management with specific programs.

Pritzl continued that the last option is a big one and it is detoxification services. He said there is a facility in another county that is a medically monitored detox service and treatment readiness. If Brown County was to use the same model of operations with a similar facility of 15 beds, the annual operating budget would be about $1.5 million dollars, with the County picking up about 50% of the cost. The rest of the cost would be covered by third party payers, other county utilization and private pay. Judge Zuidmulder asked if this was for voluntary admissions and Pritzl responded that the facility is not voluntary, they take the alcohol holds. Lindner said if the County had a facility like this, she could be doing more alcohol holds. She currently does not do holds very often because there is no place to place the people. Judge Zuidmulder said there needs to be some basis as to how the money will be used. You cannot just say you would be using the money if you had it; the County Board cannot give a resource of the amount we are talking about for a small, limited amount of people, especially when there are so many other needs. Accurate data would have to be collected and presented to demonstrate the number of people this funding would serve. Judge Zuidmulder said he has been repeatedly called out by the County Board regarding his treatment courts because the Board divides the cost of the treatment courts by the number of people in them and then they demand to know why we are spending that amount of money per person, which is not really the story at all.

Judge Zuidmulder said he is not particularly impressed with a proposal to spend $750,000 when he cannot even get $100,000 for safe and supportive housing for a population that he can identify who are in recovery from mental health issues or alcohol and drug abuse who he has to send back to a dysfunctional situation which he has been trying to get for five years. Weber responded that the people from UWGB are studying this and should be able to provide more information in August.

Weber recalled that Zima wanted to look bigger and wanted estimates on how to fix problems. Pritzl came up with models that are being used and working in bigger counties. She felt that adding a Crisis Coordinator as was discussed earlier could help find out what is going on with crisis and allow someone to take a total look at it to see if people are getting the help they need. Pritzl said a coordinator position could be tasked with that.

Officer Allen asked about the model Pritzl spoke about earlier that is being used in another County and whether it was for long term residential alcohol treatment. Lindner said the reason such a program works better is the person can be taken there for medical detox, and then there are a number of other levels of step down in the same building. Officer Allen noted there are people that call law enforcement and say they want inpatient treatment, but then they are turned down by Bellin who says they cannot just come because they want to. She pointed out there are a lot of funds that could be used that are not being used and she wonders why we would be looking elsewhere when there are services in our own county. Agar, Pritzl and Lindner all said that they would want to know if those situations are happening at Bellin because they are not hearing of those issues. Linder said if people are being turned away from Bellin she would like to look into why.

Judge Zuidmulder said what Officer Allen is saying is the same thing he said earlier about the Crisis Center. There are a number of gate keepers in the system and they are refusing treatment and the County has no way of holding them accountable for the decisions they are making even though there is money designed to make sure our citizens are receiving the services they need. He feels the County needs to start asking these gate keepers who are getting substantial amounts of money from the County to explain how many people present to them for help, how many people they turn down and what the criteria they are using for turning people down is and then invite the public to come and hear their answers. He feels it is time to air this all out and find out what is going on and then let transparency prevail and hold people accountable. Pritzl said as a department, he is not going to go down the road of publicly discrediting consumers so if this is something that Judge Zuidmulder wants to pursue it should be done by a motion made at a future meeting when both the Chair and Vice Chair of this committee are present. Judge Zuidmulder continued that when conversations are had about spending a large sum of money on the system, it would be appropriate to look at the intake part of the system to see if there is adequate monies to pay for the intake part before all sorts of other stuff is added on the top. Pritzl said that with regard to the intake part, they have made it clear and will reiterate that if someone presents, they should be served. There is no funding barrier to this. The only consideration would be if there is some regulatory issue for not taking someone.

Crawford brought up the earlier conversation regarding doing an RFP for crisis services and feels this is a good idea. He said a good way to do an RFP would be to have the Outagamie County crisis people look at the procedures used in Brown County and then Brown County could use that information to develop an RFP and he suggested that Outagamie County representatives be invited to the October meeting of this group. Pritzl did not want to set up another county to do that because the State has oversight and would issue citations and say if something is deficient regarding practices. The issue of staff turnover at the Crisis Center was discussed and the reasons for it such as low pay and people using the Crisis Center as their first job when they come out of school. It is hard to get someone to stay in a stressful position for very little pay while having to work overnight shifts in a basement. La Violette said it makes good sense to steal good ideas from successful people. Judge Zuidmulder agreed with this, however, Pritzl said he has not looked at the crisis system in Outagamie County and therefore he will not point to them as an example because he knows very little about their operations. Judge Zuidmulder said all we are talking about is gathering information which can then be used to make the critical analysis. All we are talking about is hearing what others are doing in contrast to what we are doing and then comparing their results with our results. Judge Zuidmulder questions how we are going to educate ourselves on improving our own system if we do not look at how other people operate their systems. He said before he brings items forward to the County Board he has to have full understanding of it, gathered all the information and then passionately tell the elected representatives why it is the right thing to do and if he does not have information to educate himself, he will not advocate for this.

Judge Zuidmulder was excused at 1:17 pm.

Crawford would like to see a review of the State survey of the Crisis Center on the October agenda for this committee. Lindner said she also feels this should be sent out for RFP and she feels there would be a number of responses that could be compared. Pritzl said he can ask Human Services Committee Chair Hoyer if he would be willing to put this on his agenda.

Motion made by Rebecca Lindner, seconded by Cheryl Weber to have the Human Services Department provide the most-recent State survey of crisis services at the September meeting. Vote taken. <u>MOTION CARRIED UNANIMOUSLY</u>

4. **Discussion, review and possible action: Request that the Human Services Director and Brown County Sheriff work together to develop a plan to provide a treatment plan for prisoners who presently make up a third of our jail population.**

Security Lieutenant Scott Brisbane reiterated that a second mental health professional started at the jail last week to try to triage some of the numbers that Atalie was dealing with because they were really high. He also said he would like to know if there is any funding available through the mental health funds that could benefit the jail and the Sheriff's Office. Brisbane continued the jail is running out of people to triage in the jail. He had Atalie look at the individuals who were being treated for mental health and who were on commitments and then looked at the possibility of taking those people out of the jail and moving them into a housing unit on bracelets and then having them go out to treatment. Of the 72 inmates they looked at, there were only two that would be candidates for this. One was a jail worker that they really cannot afford to lose and the other was a female who just came off punitive time. Pritzl said he made the request for this from the Sheriff as he was curious to see if we could develop something new and different which would be a step down model for people the jail may feel could go to another environment based on what the jail sees as their offense and mental health issues. He recalled that Lt. Steffen found over a year ago that there were actually very few people who would fall into this category. Brisbane said the remaining people they looked at are on warrants from different counties, unsentenced or on probation holds and have to stay in the jail.

Pritzl felt that some of the sales tax money could be used on something creative and different, but it appears that the numbers are not there. They keep looking at this, but they consistently get the same result. Pritzl said he would be interested in having information brought back regarding the added costs to the jail in 2017 for mental health services since the addition of the person was added to the staff to help Atalie.

Officer Allen asked how long it typically takes for an inmate to get their medications when they get to jail. Brisbane explained the process and said that it does take a while. Officer Allen asked if any funds could be put toward initiatives to shorten the number of steps and the length of time it takes to get medication. Brisbane said he feels the added mental health worker at the jail will help expedite the medication process.

Motion made by Cheryl Weber, seconded by Pat La Violette to have staff calculate the added costs for mental health services at the jail in 2017 and bring information back at the next meeting. Vote taken. MOTION CARRIED UNANIMOUSLY

5. **Discussion re: Recertifying County operations to return to previous services providing long-term care.**

There was no update on this other than what was discussed earlier regarding meeting the needs of people currently being sent to Trempealeau County.

6. **Update re: Outreach efforts.**

Agar informed they are currently working on a public service announcement to increase awareness of the services that the outpatient department provides. He will continue to keep this group advised of progress on the public service announcement. He also recalled a discussion at an earlier meeting about having a dedicated line for people to call to access services. Having a dedicated line 24 hours a day with a live person at the end of the line is not realistic. At this time he is anticipating approaching this by having the intake clinical social worker take the calls and make the approvals and referrals during regular hours and then outside of business hours they are looking to have Crisis staff take the calls and provide information and referrals.

7. **Such other matters as authorized by law.**

The next meeting date was discussed and August 16, 2017 at 12:00 pm was selected.

8. **Adjourn.**

Motion made by Pat La Violette, seconded by Rebecca Lindner to adjourn at 1:35 pm. Vote carried. MOTION CARRIED UNANIMOUSLY

Respectfully submitted,

Therese Giannunzio
Recording Secretary

BROWN COUNTY HEALTH & HUMAN SERVICES
111 N. Jefferson Street
P.O. Box 22188
Green Bay, WI 54305-2188

Phone (920) 448-6000 Fax (920) 448-6166

To: ad-hoc Mental Health Treatment Committee
Human Services Committee

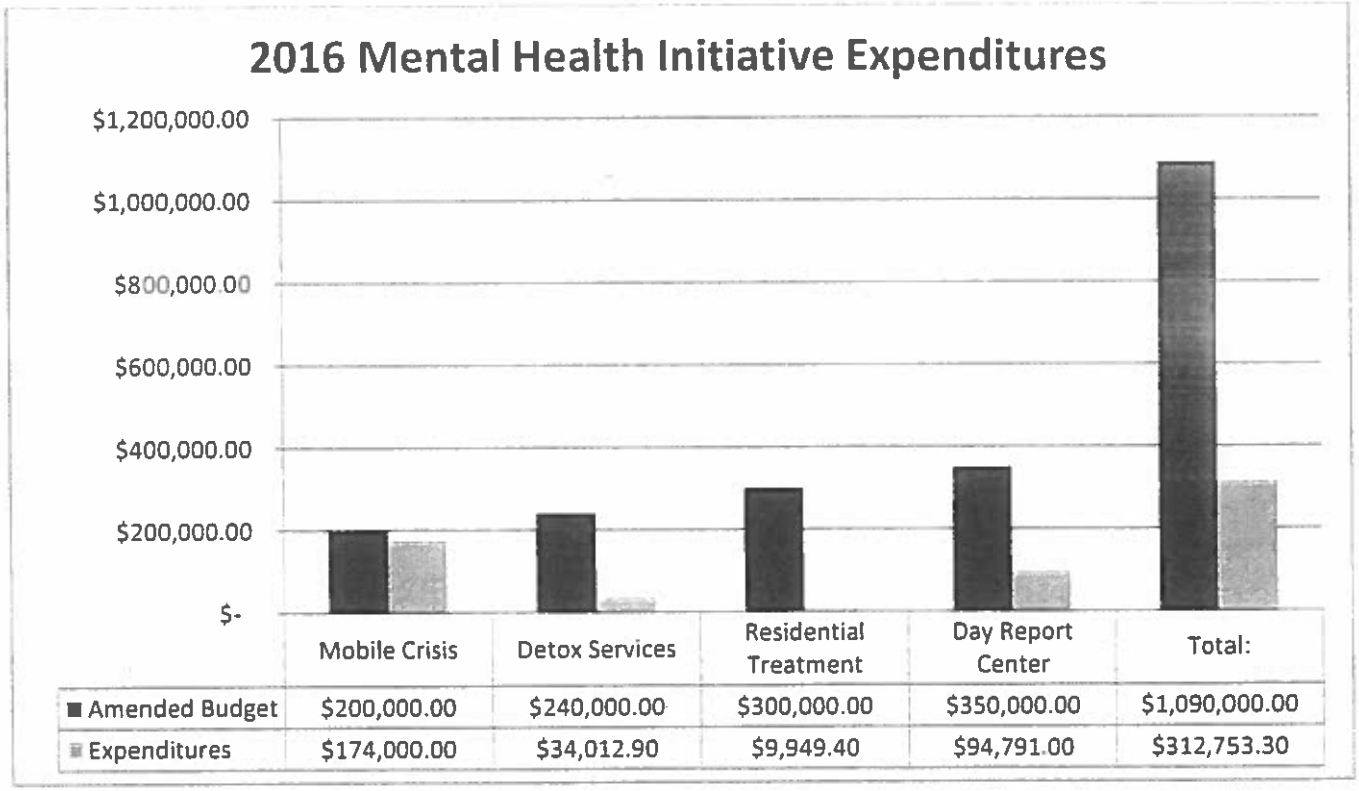
From: Erik Pritzl, Executive Director

Date: July 19, 2017

Re: Mental Health Initiative Expenditures 2016-2017

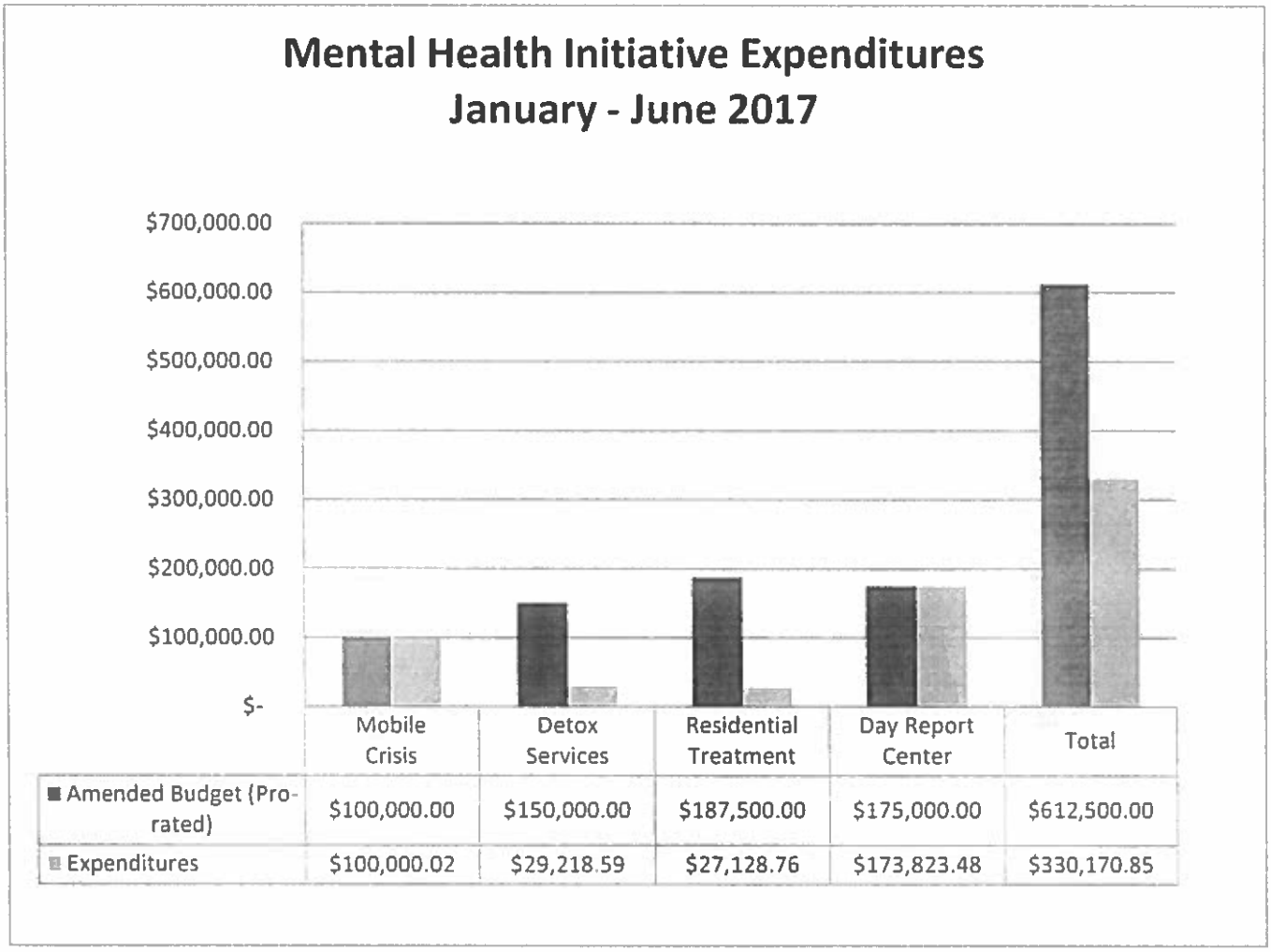
The following updated summary of expenditures related to the Mental Health Initiatives in 2016 and the first six months of 2017 are submitted in response to a request from members of the ad-hoc Mental Health Treatment Committee.

The chart below represents the 2016 expenditures on the various initiative components. The total available budget for the initiatives was $1,090,000.



	Mobile Crisis	Detox Services	Residential Treatment	Day Report Center	Total:
Amended Budget	$200,000.00	$240,000.00	$300,000.00	$350,000.00	$1,090,000.00
Expenditures	$174,000.00	$34,012.90	$9,949.40	$94,791.00	$312,753.30

The second chart below represents the 2017 expenditures for January-June. The total available budget for the initiatives is $1,225,000.



	Mobile Crisis	Detox Services	Residential Treatment	Day Report Center	Total
Amended Budget (Pro-rated)	$100,000.00	$150,000.00	$187,500.00	$175,000.00	$612,500.00
Expenditures	$100,000.02	$29,218.59	$27,128.76	$173,823.48	$330,170.85

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To: ad-hoc Mental Health Treatment Committee
Human Services Committee

From: Erik Pritzl, Executive Director

Date: July 19, 2017

Re: Optional Additions for Mental Health Services

Based on year to date spending for initiatives in 2017, it is projected the department will have $709,000 in expenditures at the end of the year. This is broken down as follows:

- Mobile Crisis Expansion: $200,000
- Day Report Center: $350,000
- Detoxification Services: $60,000
- Residential Treatment: $99,000

This could result in unexpended funds in the amount of $441,000 to use for expanding other services. Some options include:

Expand Re-Entry Services

Currently there is a position dedicated to supporting people with mental health issues being released from the jail. At past presentations to the ad-hoc committee, the staff member in the position reported seeing a high number of people, with a low rate of re-entering the jail. Unfortunately, there is a high volume of people to see in this program which limits the number and duration of contacts with individuals. The department could expand the program to allow for more contacts post-release. This would require adding a Clinical Social Worker position, with an estimated annual cost of $87,935.

Enhance Crisis Coordination and Initiative Coordination

At the last ad-hoc committee meeting, there were questions raised about staff capacity to coordinating activities associated with crisis services and the mental health initiatives. It would be advantageous to have a position dedicated to coordinating all crisis services, including those components of the initiatives. As demand and programming has grown, there is an increased need for coordination of internal and external providers. This would include overseeing the

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coordination of the emergency detention process. The estimated annual cost to add a Behavioral Health Supervisor is $93,797.

Expand Clinical Intake Services

There has been discussion related to capacity to coordinate and meet consumer needs associated with increased clinical intake. As the number of people utilizing detoxification, residential treatment, and other services increases, the demand for clinical intake grows. In addition, the number of people receiving services through commitments and hold open agreements has increased. In 2013 there were 194 people on commitments and hold open agreements. In 2016, this number had increased to 232, and is projected to be 240 in 2017. Adding a Clinical Social Worker position would have an estimated annual cost of $87,935.

Modify Detoxification Services

The department could develop and utilize a medically monitored detoxification facility to address the needs of people who are incapacitated or intoxicated. The general purpose of the facility is to meet short term stabilization needs, and treatment readiness. There is a vendor that currently operates a facility in another county. Using the model of operations in that county, a similar facility (15 beds) is estimated to cost about $1.5 million annually, with the county estimated to fund about 50% of the cost.