PROCEEDINGS OF THE BROWN COUNTY
HUMAN SERVICES COMMITTEE

Pursuant to Section 19.84 Wis. Stats., a regular meeting of the **Brown County Human Services Committee** was held on Wednesday, January 25, 2023 in Room 200, Northern Building, 305 E. Walnut St., Green Bay, Wisconsin.

Present: Chair Emily Jacobson, Vice-Chair Megan Borchardt, Supervisor Pat Hopkins, Supervisor Barbara Avery, Supervisor Pat Evans

Also Present: CVSO Joe Aulik, ADRC Director Devon Christianson, HHS Executive Director Jeremy Kral, CTC Hospital and Nursing Home Administrator Kara Gruber, Public Health Officer Anna Nick, Finance Director Eric Johnson, Community Services Administrator Jenny Hoffman, Director of Administration Chad Weininger, Supervisors Schultz, Lund, and Schadewald; Judge Zuidmulder, Guy Zima, Erik Hoyer, and other interested parties

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I. **Call Meeting to Order.**

The meeting was called to order by Chair Emily Jacobson at 5:30 p.m.

II. **Approve/Modify Agenda.**

Motion made by Supervisor Evans, seconded by Supervisor Borchardt to modify agenda to take Items 20 & 21 prior to Comments from the Public. Vote taken. MOTION CARRIED UNANIMOUSLY

III. **Approve/Modify Minutes of December 14, 2022.**

Motion made by Supervisor Borchardt, seconded by Supervisor Hopkins to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

Although shown in proper format here, Items 20 & 21 were taken at this time.

Comments from the Public. None.

Consent Agenda

1. **Board of Health minutes of November 15, 2022.**
2. **Children With Disabilities Education Board minutes of November 17 and November 22, 2022.**
3. **Criminal Justice Coordinating Board minutes of November 1, 2022.**
4. **Human Services Board minutes of November 10, 2022.**
5. **Community Treatment Center and Community Services Financial Reports.**
6. **Health & Human Services - Statistical Reports.**
   a) **Monthly CTC Data – November and December 2022.**
      i. **Bay Haven Crisis Diversion.**
      ii. **Nicolet Psychiatric Center.**
      iii. **Bayshore Village (Nursing Home).**
      iv. **CTC Double Shifts.**
   b) **Child Protective Services – Child Abuse/Neglect Report - November 2022.**
   c) **Monthly Contract Update – January 2023.**

Motion made by Supervisor Borchardt, seconded by Supervisor Evans to suspend the rules to take Items 1-6 together. Vote taken. MOTION CARRIED UNANIMOUSLY

Motion made by Supervisor Evans, seconded by Supervisor Borchardt to receive and place on file Items 1-6. Vote taken. MOTION CARRIED UNANIMOUSLY

7. Audit of Bills.

Motion made by Supervisor Evans, seconded by Supervisor Borchardt to acknowledge receipt of the bills. Vote taken. MOTION CARRIED UNANIMOUSLY

Veterans

8. Director's Report.

CVSO Joe Aulik outlined the information in his report contained in the agenda packet and noted they were at $7.4 million dollars in retroactive pay for 2022 which is a record and about $3 million dollars more than 2021.

Motion made by Supervisor Evans, seconded by Supervisor Borchardt to suspend the rules to take Items 11 & 12 at this time. Vote taken. MOTION CARRIED UNANIMOUSLY

Motion made by Supervisor Evans, seconded by Supervisor Borchardt to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

Aging & Disability Resource Center

9. Director's Report.

ADRC Director Devon Christianson introduced the new ADRC Board Chair, Bob Johnson, who briefly outlined his background and addressed questions and concerns regarding the kitchen project.

Christianson also provided the February 2023 ADRC Magazine and spoke to some of the programming. She also noted they applied for an independent living pilot which would change available service options for older adults and people with disabilities in the community who are not quite ready for long-term care.

Even though the public health emergency continues, Christianson informed the federal government and state has separated ongoing continuous Medicaid eligibility from the public health emergency. Eligibility for all customers who have been on long term care programs or Medicaid based programs who have been able to keep continuous eligibility regardless of income or assets will change as of April 1. This will drive a lot of work at the ADRC as they assist a tremendous number of individuals who will become ineligible for those benefits.

Motion made by Supervisor Borchardt, seconded by Supervisor Hopkins to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

Syble Hopp

10. Director's Report.

Syble Hopp Administrator Kim Pahlow was unable to attend the meeting, however, she did provide a report, a copy of which is attached.

Motion made by Supervisor Borchardt, seconded by Supervisor Avery to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

Health & Human Services (HHS) Department

11. Executive Director's Report.

Health and Human Services Executive Director Jeremy Kral provided a written report, attached, and briefly touched on the items in the report. He also informed the department has received word that they were awarded a requested increase in TAD grant funding so treatment courts will have the opportunity to grow and add service and capacity.

Kral also mentioned the process of reestablishing eligibility for Medicaid and other programs as Christianson talked about earlier. The magnitude of workload this will bring cannot be overstated and he expressed gratitude to existing staff and those who will be joining staff to work on this. Kral feels the process will likely take at least a year.

Motion made by Supervisor Hopkins, seconded by Supervisor Borchardt to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

Action Items including Proposed Resolutions, Ordinances, and Budget Adjustments

12. Veterans Services – Budget Adjustment Request (22-181): Any increase in expenses with an offsetting increase in revenue.

Motion made by Supervisor Evans, seconded by Supervisor Borchardt to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

13. Veterans Services - Resolution Approving New or Deleted Positions During the 2023 Budget Process in the Veterans Services Department – Veterans Benefit Specialist Positions.

Aulik informed the newly provided supplemental CVSO grant for $19,000 should cover this for 2023 and he will try to work this into his budget for 2024. No action is needed on the resolution at this time.

Motion made by Supervisor Evans, seconded by Supervisor Borchardt to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

14. HHS – Budget Adjustment Request (22-177): Any increase in expenses with an offsetting increase in revenue.

Motion made by Supervisor Evans, seconded by Supervisor Hopkins to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

15. HHS - Request for New Non-Contracted and Contracted Providers – January 2023.

Motion made by Supervisor Evans, seconded by Supervisor Jacobson to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

16. HHS – Resolution Regarding Table of Organization Change for the Health & Human Services Department – Community Services Division – Child and Adult Protection Unit Changes (23-037).

Motion made by Supervisor Borchardt, seconded by Supervisor Hopkins to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

17. HHS - Resolution Regarding Table of Organization Change for the Health & Human Services Department – Community Treatment Center Division – Director of Health Services (23-038).

Motion made by Supervisor Borchardt, seconded by Supervisor Hopkins to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

18. HHS – Resolution Regarding Table of Organization Change for the Health & Human Services Department – Community Services Division – Social Worker/Case Manager (CLTS) (23-039).

Motion made by Supervisor Hopkins, seconded by Supervisor Borchardt to approve. Vote taken. MOTION CARRIED UNANIMOUSLY

19. HHS - American Rescue Plan Act (ARPA)

a. Review and approve grant application.
b. Review application process and approval process.

Kral recalled the Committee and County Board approved a second round of ARPA grants and the intention was to make it very similar to last year's round which worked pretty well for community partners and administration purposes. The grant application was previously emailed to the Committee and Kral noted changes were shown in red. The application called for a maximum of $100,000 per organization and they also wrote in the possibility of setting aside some of the funds for smaller organizations. Director of Community Programs Jenny Hoffman talked briefly about the application timeline and process.

Motion made by Supervisor Borchardt, seconded by Supervisor Avery to suspend the rules to take Items 19a & b together. Vote taken. MOTION CARRIED UNANIMOUSLY

Motion made by Supervisor Borchardt, seconded by Supervisor Hopkins to approve Items 19 a & b. Vote taken. MOTION CARRIED UNANIMOUSLY

Communications

20. Communication from Supervisor Evans re: To continue the Mental Health Subcommittee.

Evans informed he would like to see the Mental Health Subcommittee continued as it was extremely important. Mental health is extremely important and there are organizations trying to do things, but most of that is making connections throughout the region. Evans is more concerned about Brown County.

Motion made by Supervisor Evans, seconded by Supervisor Borchardt to suspend the rules to allow interested parties to speak. Vote taken. MOTION CARRIED UNANIMOUSLY

Judge Donald Zuidmulder
Judge Zuidmulder spoke to the history of the Mental Health Subcommittee and encouraged bringing it back as he felt it was very valuable.

Guy Zima, 1121 12th Ave., Green Bay – Not a lobbyist
Zima also spoke to the history of the Mental Health Subcommittee and said he was in favor of reinstating it. He provided several handouts (attached) which outline the mission of Health and Human Services and noted he would like to see the mission include "striving to cure and heal the afflicted to better health and future self". He felt we need to urge administration to start getting things done and that Brown County could be a regional center for mental health patients.

Dr. Erik Hoyer, 3320 Michael Court, Green Bay – Not a lobbyist
Hoyer encouraged the committee to think of ways to reinvigorate the subcommittee because it did have some uniqueness's that were beyond the scope of what is currently being done. In the initial form there was a lot of integration between the public safety aspect of mental health and the human services aspect which he felt allowed collaborations that helped come up with new ways of approaching mental health.

Supervisor Lund
Lund spoke in favor of making Brown County a regional center like Zima said. He has been an advocate for mental health awareness and felt the county will be getting more money for mental health from the surplus. He did not object to reinstating the Mental Health Subcommittee but felt there needs to be parameters to work on including how to get the best bang for the buck on money allocated for mental health.

Supervisor Schultz
Schultz was a member of the Mental Health Subcommittee and prior to that he was in the EM1 Committee with the Sheriff's Department for 16 years. We already have the Human Services Committee which has the responsibility of what mental health employees are doing, the Human Services Board which is required by statute and has the responsibility of making sure the proper services are being provided by the county and the EM1 Committee which is loaded with the players – law enforcement, human services and others. He felt the Mental Health Subcommittee lost its purpose and did not have direction and became a mirror of its parents. The responsibilities of the Subcommittee can be covered in

the three existing bodies. If the Subcommittee is to come back, he highly suggested it be looked at as a work group or task force with a specific assignment and a specific amount of time to get it done.

Supervisor Schadewald
Schadewald noted there have been other committees, such as the Rural Broadband Subcommittee, that were very successful with limited range, timeline, etc. He felt a Subcommittee should be focused on partnerships and taking the info they have and putting it together to create greater efficiencies and integrate money that comes in from federal and state government as well as schools to make Brown County better. The Subcommittee would need to have a specific purpose.

Supervisor Avery stated many years ago she had mental health issues, and it makes her heart explode to see how far they have come to help people. She's glad to be back in Wisconsin, its much more personal and helpful. She felt they're doing a great service to keep this going, maybe finetune it, etc. She's happy to see what's happening.

Supervisor Evans stated maybe what happened was COVID, etc. He could see the committee reestablished and have them report back to this committee on the goals and charges and then do some brainstorming to identify the problems and identify what they want to work on. He heard the committee was doing good things and then maybe lost their focus with COVID. Evans liked the idea of having a mental health task committee but they would need to know what the focus would be. He felt there could be great success and was glad to see there were people interested in this. He would like to see the committee put back together.

Chair Jacobson felt if the goal was to help with mental health in our community, we need public members working on it, not people connected to public service including someone who is working with the opioid and fentanyl issues. She would like to see this as more of a task force that reports back measurables. Jacobson also felt we should find someone in the community who does grant writing to participate. She would like a percentage of members to be people who have mental issues and are willing to talk about their struggles and share their views.

Lund felt another meeting should be held on this where people come with ideas so the committee is laser focused on what is going to be done. He reminded there will be mental health funds coming from the state and that may change the focus of the committee. Further, Lund felt the county needs to be the regional center for these discussions and the schools need to be included.

Motion made by Supervisor Borchardt, seconded by Supervisor Hopkins to approve a Mental Health Task Force and designate Supervisor Evans as the point person to create and report back. Vote taken. MOTION CARRIED UNANIMOUSLY

21. Communication from Supervisor Evans re: Have a review of the CTC's (all 3 entities) occupancy, rates, net income/net loss, and staffing for 2022. And any projections for 2023 as it relates to the referenced items.

Evans would like to see the CTC being utilized as much as it can and get it back to pre-pandemic numbers. It is an expensive facility and he wanted to be sure it is utilized. The CTC was one of Evans's biggest accomplishments and he has seen some of the utilization numbers and noted there have been points where there are only a few people at Nicolet. One of the parameters that was put on the CTC was that it was basically for Brown County citizens. It costs a great amount of money to run the facility and he wants to see it being utilized. He doesn't like seeing people being sent out of the county when we have this facility.

Kral informed when he looked at the census over time, the nursing home has been strong, and he does not expect that to change. The census on Nicolet and Bay Haven changes all the time. The average stay at both Nicolet and Bay Haven is about a week. As a crisis diversion facility, Bay Haven needs to remain calm and therapeutic and while it is listed with an occupancy of 16, it has never had an average census greater than eight. Sometimes the census is low because they are serving people with high needs and Kral noted the decision for each admission is made individually based on the seriousness of the needs of

the person presenting and the needs of others being served. Further, they are working on scaling up existing staff to add capacity to serve people with higher levels of need. They are seeing people presenting with more aggression and violence than in the past and in order to have staff capable of supporting these needs and also make them confident in continuing to report to work they are bringing in additional training on crisis intervention.

Evans appreciated the need to take care of people, but it made him nervous to hear that because they are taking care of this person, they are not able to take care of that people. He worried that some will be sent to facilities that are more restrictive than they need or does not offer the appropriate care needed. Kral responded that Brown County is the only county in the state with three freestanding psychiatric hospitals – Brown County, Willow Creek and Bellin. Winnebago is the most commonly used fourth option. Typically, people with medical needs or aggression needs that cannot be met at Nicolet are sent to Winnebago.

Evans mentioned civil rights issues when it comes to the least restrictive environment. He was concerned that taking people to places like Winnebago may violate a person's civil rights because it is more restrictive than necessary. He wanted to make sure the county and individuals are protected and we need to figure out how to take care of the people who need help.

Lund added staff cannot be overburdened by taking everyone in. If we have to build more capacity, we need to figure out how much more is needed to not have to send people away and be able to staff it. Evans did not feel we need more capacity; we need to look at staffing and training.

Evans outlined the number provided in the handout regarding how much the county spends sending people to other counties. Kral noted the department's initiative for the 2023 budget is to reduce utilization at Winnebago and they have established an internal work group to look at this to maximize utilization and find ways to say yes to certain people. He noted staffing issues themselves are not driving any admission decisions.

CTC Hospital and Nursing Home Administrator Kara Gruber informed when she joined the staff Kral let he know that reducing admissions to other facilities was something he wanted to focus on. They are seeing higher acuity of people in terms of dangerousness and aggression, but medical acuity has also played a factor in some circumstances. The interdisciplinary team, consisting of psychiatrists, a nurse and Social Services is typically who makes the determination as to sending patients to other facilities. Kral added this is not an exact science; we are talking about the risk and relative risk of the person they are admitting and those already on the unit. Having a lot of gaps between the acuity presents risk to vulnerable people when there are other people who may have significant aggression. They also balance the overall acuity in making sure staff can be safe and successful while managing the risk of harm to people being served. Evans questioned why someone who is violent is not sent to Winnebago so more less violent people can be taken care of here. Gruber responded there are multiple interventions and it depends what the individual needs are. Those who present continuous problems are sometimes transferred to Winnebago.

Motion made by Supervisors Evans to suspend the rules to allow interested parties to speak. *No second; no vote taken.*

Evans found it very inappropriate not to open the floor and this was discussed further before a second motion was made.

Motion made by Supervisor Evans, seconded by Supervisor Borchardt to suspend the rules to allow interested parties to speak. Vote taken. <u>MOTION CARRIED UNANIMOUSLY</u>

<u>Guy Zima</u>
Zima expressed concerns with the CTC. He felt there is a lot of pathetic bureaucratic BS. He noted Bay Haven is actually 15 beds and not built for only a few people, but they are never interested in improving service. Zima talked about the increasing size of the county and there are only 31 beds for the mental health system. There is a huge payroll and a $20 million dollar facility for the need for human services in

the mental health area and only a few people being treated. He shared firsthand experience with the facilities. There is basically an empty facility and there is a big mental health crisis going on. There are no goals being set or outreach going on; the county is only doing a minimal job and is satisfied just crawling along. He felt the county can start doing more with less. There is very little happening here for the mentally ill and someone needs to know that this is not being run well and he is not going to stand for it anymore.

Motion made by Supervisor Evans, seconded by Supervisor Borchardt to return to regular order of business. Vote taken. MOTION CARRIED UNANIMOUSLY

Motion made by Supervisor Evans, seconded by Supervisor Hopkins to receive and place on file. Vote taken. MOTION CARRIED UNANIMOUSLY

Other

22. Such other Matters as Authorized by Law. None.

23. Adjourn.

Motion made by Supervisor Avery, seconded by Supervisor Borchardt to adjourn at 8:00 p.m. Vote taken. MOTION CARRIED UNANIMOUSLY

Respectfully Submitted,

Alicia Loehlein
Legislative Specialist

BROWN COUNTY COMMUNITY TREATMENT CENTER
DECEMBER 2022 BAY HAVEN STATISTICS

	DECEMBER	YTD 2022	YTD 2021		DECEMBER	YTD 2022	YTD 2021
ADMISSIONS							
Voluntary - Mental Illness	7	92	95	**AVERAGE DAILY CENSUS**	2.9	4.5	4.3
Emergency Detention - Mental Illness	0	0	0				
Return from Conditional Release	0	0	0	**INPATIENT SERVICE DAYS**	89	1653	1587
Court Order - Prelim Mental Illness	0	0	0				
Court Order - Final Hearing	0	0	0	**BED OCCUPANCY**	19%	30%	29%
Other - EPP	0	1	2				
TOTAL	7	93	97	**DISCHARGES**	10	96	93
READMIT WITHIN 30 DAYS				**DISCHARGE DAYS**	355	1951	1536
Readmit within 30 days	1	4	7				
				AVERAGE LENGTH OF STAY	35.5	20.3	16.5
IN/OUT	1	5	9				
ADMISSIONS BY COUNTY				**AVERAGE LOS BY COUNTY**			
Brown	7	91	91	Brown	35.5	25.6	19.6
Door	0	0	0	Door	0	0.0	0.0
Kewaunee	0	0	0	Kewaunee	0	0.0	0.0
Oconto	0	1	0	Oconto	0	0.0	0.0
Marinette	0	0	0	Marinette	0	0.0	0.0
Shawano	0	0	0	Shawano	0	0.0	0.0
Waupaca	0	0	0	Waupaca	0	0.0	0.0
Menominee	0	0	0	Menominee	0	0.0	0.0
Outagamie	0	1	2	Outagamie	0	0.0	0.0
Manitowoc	0	0	0	Manitowoc	0	0.0	0.0
Winnebago	0	0	0	Winnebago	0	0.0	0.0
Other	0	0	4	Other	0	0.0	0.6
TOTAL	7	93	97	**TOTAL**	35.5	25.5	19.5

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BROWN COUNTY COMMUNITY TREATMENT CENTER
DECEMBER 2022 NICOLET PSYCHIATRIC CENTER STATISTICS

	DECEMBER	YTD 2022	YTD 2021
ADMISSIONS			
Voluntary - Mental Illness	27	292	258
Emergency Detention - Mental Illness	19	239	297
Return from Conditional Release	4	62	83
Court Order - Prelim Mental Illness	0	0	0
Court Order - Final Hearing	0	2	4
Other	0	6	2
TOTAL	50	601	644
READMIT WITHIN 30 DAYS			
Readmit within 30 days	2	59	85
IN/OUT	2	19	26
ADMISSIONS BY COUNTY			
Brown	42	541	562
Door	0	5	10
Kewaunee	0	4	6
Oconto	2	9	11
Marinette	0	7	2
Shawano	0	1	1
Waupaca	0	2	1
Menominee	0	0	2
Outagamie	2	11	20
Manitowoc	1	4	5
Winnebago	0	3	8
Other	3	14	16
TOTAL	50	601	644

	DECEMBER	YTD 2022	YTD 2021
AVERAGE DAILY CENSUS	8.2	9.2	10.0
INPATIENT SERVICE DAYS	255	3373	3649
BED OCCUPANCY	51%	58%	62%
DISCHARGES	49	601	641
DISCHARGE DAYS	274	3455	3477
AVERAGE LENGTH OF STAY	5.6	5.7	5.4
AVERAGE LOS BY COUNTY			
Brown	6.0	5.8	5.4
Door	0.0	0.4	0.7
Kewaunee	0.0	0.2	3.9
Oconto	3.5	2.6	0.2
Marinette	0.0	1.2	0.1
Shawano	0.0	0.0	0.0
Waupaca	0.0	0.3	0.0
Menominee	0.0	0.0	0.3
Outagamie	8.0	9.3	5.4
Manitowoc	6.0	3.0	0.1
Winnebago	0.0	0.0	12.5
Other	3.5	7.0	1.4
TOTAL	6.0	5.8	5.3

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Bayshore Village
December
2022 Statistics

NURSING HOME			
ADMISSIONS	DEC 2022	Yr to Date 2022	Yr to Date 2021
From Nicolet Psychiatric Center	0	2	5
From General Hospital	2	6	8
From Nursing Home	0	0	1
From Home	0	3	0
From Residential Care Facilities	1	2	2
Protective Placement	1	15	13
Other	1	2	0
Total	5	30	29
DISCHARGES	DEC 2022	Yr to Date 2022	Yr to Date 2021
To Nicolet Psychiatric Center	0	0	1
To General Hospital	0	0	3
To Nursing Home	0	1	0
To Home	0	2	6
To Alternate Care Programs	0	0	0
To CBRF	0	9	0
Expired	0	18	11
Other	0	1	0
Total	0	31	21
Bed Occupancy Including Payable	94.3	95.3	95.8
(Bed Hold Days)			
Total Service Days	DEC 2022	Yr to Date 2022	Yr to Date 2021
SNF - (Skilled Nursing Facility)	1841	21662	21948
Paid Bed Hold Days	0	169	76
Total Payable Days	1841	21831	22024
Unpaid Bed Hold Days	15	75	17
Total	1856	21906	22041
Average Daily Census	DEC 2022	Yr to Date 2022	Yr to Date 2021
Avg Census (Payable Days)	94.3	94.9	95.8
(total days/total beds)			
Avg Census (All Days)	95.0	95.3	95.9
(total days/total beds)			
Avg. Daily Census Bayshore Village(63 Beds)	59.4	59.7	60.3
** Nursing Home client with DD1A Level of Care			

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SYBLE HOPP – HUMAN SERVICES COMMITTEE REPORT

Submitted by Kim Pahlow, Administrator - JANUARY 25, 2023

1) We are excited to be using all of the spaces that were added on or renovated over the spring/summer. Our sensory, therapy and vocational training spaces are all up and running and being used frequently. In addition, our new drop off/pick up system is going great and is much safer for our students, staff and families. We will be holding an Open House in the spring (May). Once a final date has been set...we will let the committee know.

2) We are excited to be selected as a Give Big Green Bay participant for the second year in a row. Dates are noon on February 21 through noon on February 22nd.

3) We are looking forward to having the "Pancake Man" at our March 2nd family event. In the past we have made and served spaghetti but are trying something new this year. Feel free to join us anytime between 4:30-6:00 pm. There will also be a Book Fair at the same time.

4) Graduation has been set for May 18th at 5:30 pm. It will be held at the school again this year.

5) Staffing – we continue to be short-staffed in instructional aides. We have had better luck recently so are getting our positions filled with more success. Getting substitute teachers also continues to be a challenge.

BROWN COUNTY HEALTH & HUMAN SERVICES

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Phone (920) 448-6000 Fax (920) 448-6126

Jeremy Kral, *Executive Director*

January 25, 2023

Executive Director's Report to the Brown County Human Services Committee and Human Services Board

The Brown County Overdose Task Force met last Thursday (1/19). The task force is at the beginning of its work, bringing community resources together to drive impactful collaborative solutions moving forward. Brown County and its leaders also continue efforts to advocate for a statewide response. This includes a statewide declaration, funding, and consistent messaging to address the fentanyl crisis. Efforts have included speaking twice to the Wisconsin Counties Association (WCA) about the urgency to create statewide marketing and branding efforts. This would make it easier for counties to disseminate important education to the communities they serve.

The Public Health Division is exploring a possible MOU which would facilitate collaboration with the Oneida Nation Public Health on data sharing and analysis through the epidemiologist role. If the agreement is entered, Brown County would receive revenue under the agreement in exchange for analysis and expertise shared in collaboration with the Oneida Nation.

Respectfully submitted by:

Jeremy Kral
Executive Director

Public Health
Prevent. Promote. Protect.
Public Health Division
Brown County Health and Human Services

Health & Human Services

Erik Pritzl – Executive Director
(920) 448-6000

Human Services Mission

Brown County Human Services shall respect the trust and confidence of the community as it fulfills its duty to:

- Protect abused and maltreated children and vulnerable adults.
- Provide effective juvenile justice services to underage offenders in order to recover young lives while protecting the community.
- Enrich the lives of people with disabilities.
- Provide economic assistance to eligible people in financial distress.
- Respond to those with mental illness and addiction with faith in the values of hope and recovery.
- Provide compassionate care for the elderly that offers fulfillment and meaning.

The department shall constantly demonstrate fiscal stewardship, respecting that it serves at the consent of its citizens and their elected representatives.

Public Health Mission

The Brown County Health & Human Services – Public Health Division protects and promotes health through prevention, education and leadership.

Program Description

Health & Human Services is organized into four divisions:

I. Community Services – The Community Services Division provides case management, community-based clinical services, child and adult protective services, psychosocial rehabilitation programs, court-related youth justice and diversion programs, long-term care, economic support services, criminal justice services and volunteer services where citizen volunteers provide valuable transportation and assistance to consumers that would have to be otherwise purchased by the department.

II. Community Treatment Center – The Brown County Community Treatment Center provides services to a variety of citizens in the immediate community. Psychiatric services are also provided to 10 other counties under contractual agreements. The Nicolet Psychiatric Center provides psychiatric care to people in need of an acute, locked setting. The Bay Haven 15-bed Crisis Stabilization Unit opened in December 2013 to provide treatment to individuals in crisis that do not require the more restrictive hospital care. The 63-bed Bayshore Village skilled nursing facility housed within the Community Treatment Center provides long-term care to those in need.

III. Business Operations – The Business Operations Division provides contract management, business support, audits, budget planning and fiscal reporting services. Specific liaison functions are provided with Technology Services, Human Resources, Purchasing and the Department of Administration.

IV. Public Health – The Public Health Division provides communicable disease surveillance and control, chronic disease prevention, maternal/child health promotion and education, community engagement outreach and advocacy, management of environmental hazards, code enforcement, licensing and inspection visits, laboratory services, and public health emergency preparedness.

Performance Measures – Human Services	2020 Actual	2021 Estimate	2021 Budget	2022 Budget	Budget Change
Child Protection Reports	3,690	4,470	5,200	5,200	0.00%
Child Protection Reports Assessed	1,335	1,765	1,500	1,800	20.00%
Days of Inpatient Care Purchased by Other Counties' Residents	613	410	821	614	-25.21%
Days of Inpatient Care Provided to Brown County Residents	2,934	3,312	2,873	3,219	12.04%
Emergency Mental Health Detentions	847	820	875	875	0.00%
Economic Support Applications Processed	24,466	25,332	24,960	25,839	3.52%
Economic Support Caseload	30,093	32,125	27,654	32,286	16.75%

To strive to cure and heal the
afflicted to better health and future self

Connections
for mental wellness

>> MyConnectionNEW.org

Our Role in the Community

Connections for Mental Wellness is a community-wide collective impact initiative in Brown County, Wisconsin that brings together and facilitates diverse groups of stakeholders (i.e. non-profits, government, education organizations, employers, health systems, etc.) to help address community needs and issues related to mental wellness and mental health care. We focus on issues that cannot be solved by one organization alone. With the core values of **innovation, collaboration, compassion, inclusion** and **equity**, Connections envisions a community that values and embraces the need for mentally health children, adults, and families.

What is Collective Impact?

Connections for Mental Wellness Mission

To transform the mental health of our community through collaboration, education, and enhanced systems of care for mental wellness.

Our Vision

Striving for mental wellness every day for everyone.

Our Values

- Innovation: Bringing together various new ideas that have a positive impact.
- Collaboration: While challenging self-interest, we commit to work together for the greater good as demonstrated by a willingness to give and take.
- Compassion: We care deeply for the suffering of others and have a desire to respond to the best of our ability while maintaining dignity and respect.
- Inclusion: We welcome all in need and all who wish to help.
- Equity: We look to identify and address disparities of mental wellness in order to provide access to services for all.

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2021 – COMMUNITY SERVICES DIVISION

Behavioral Health Program Area

Crisis Services

Voluntary Hospitalizations

Voluntary admissions/hospitalizations happen when a patient, without coercion, agrees to enter a psychiatric hospital or other inpatient unit at his or her own request. This type of hospitalization can end whenever the patient sees fit.

Emergency Detentions (Involuntary Hospitalization)

Emergency Detentions are a means intervening in an emergency situati if it is probable that a person is unab to provide for his or her own are. T situation must create a substantial r of physical harm to the person, or to others, if protective action is not immediately taken.

Of the 674 Emergency Detentions i 2021, 210 individuals were served a Winnebago Mental Health Institute In 2020, 114 individuals were serve WMHI.

linician-Law Enforcement Teams

ıe Systemwide Mental-Health ssessment and Response Team MART) is a co-deployed Officer- inician mobile unit that responds to ychiatric crisis situations in Brown ounty. The team responds to active ychiatric crisis situations and/or ıtreach to individuals who have a high ıtential of experiencing a psychiatric isis.

second behavioral health clinician as added in 2021 to work alongside own County Sheriff's Department ıd Ashwaubenon Public Safety.

ata for the success of these efforts in)21 is summarized in the chart to the ght.

SMART Overall Face-to-Face Assessment Outcomes

	Total 390	Percent Outcom
Situation De-escalated	65	17%
Adult/Youth Diverted from Inpatient	160	41%
Crisis Stabilization	4	1%
Voluntary Hospitalization	37	9%
Emergency Detention	77	20%
Dual Detention	4	1%
Arrested	12	3%
Return to More Restrictive	2	1%
Other Outcome	29	%

Brown County Health & Human Services
As of 1/24/2023 - including estimates for Dec 2022 accounting period not yet closed
5 Year Trend - Out of County Mental Health Stays

GL Account / Facilities	Description	2018	2019	2020	2021	2022
201.076.170.173.7000.SMHS	Purchased Services - State Mental Health Stay Charges (Adults)					
WI State Mental Health Centers	Winnebago County & Dane County	265,146	648,043	663,463	1,571,240	2,528,421
Trempealeau County Health Care Center	Trempealeau County	972,183	601,784	331,734	224,784	65,559
	Total 201.076.170.173.7000.SMHS	1,237,329	1,249,827	995,197	1,796,024	2,593,980
201.076.140.141.7000.SMHS	Purchased Services - State Mental Health Stay Charges (Children)					
WI State Mental Health Center	Winnebago County	175,668	309,596	514,367	391,196	360,775
201.076.170.173.7000.CMI	Purchased Services - Chronic Mentally Ill (Adults)					
Trempealeau County Health Care Center	Trempealeau County	14,604	9,094	59,829	198,773	796,977
201.076.170.173.7000.IMD	Purchased Services - IMD OBRA Relocations (Adults)					
Trempealeau County Health Care Center	Trempealeau County	85,775	-	-	5,707	-
	Total - All GL Accounts	**1,513,376**	**1,568,517**	**1,569,393**	**2,391,700**	**3,751,732**

BROWN COUNTY HEALTH & HUMAN SERVICES
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Green Bay, WI 54301
Phone (920) 448-6000

Estimated 2022 Tax Levy applied to Inpatient Units at Brown County CTC as of 11/30/2022 (11 months)

CBRF	$	(97,431)
Hospital	$	(941,983)
Nursing Home	$	(2,535,311)

A positive revenue adjustment in the range of $250 – 350k for Nursing Home is expected but not yet received.

CTC Nursing Position Staffing 2022 and 2023

Current status of nursing staff vacancies were reviewed. These positions include certified nursing assistants (CNA), licensed practical nurses (LPN), and registered nurses (RN). Each of these roles currently has a vacancy rate of approximately 30%. While there is lag and variability in national data, it is reported that 60% of hospitals have a nursing vacancy rate greater than 15%. The duties of these vacant positions have generally been filled with agency or contracted staff to maintain staffing ratios.

The HHS Department has sought to make these positions more attractive by bringing forward table of organization changes to raise wages, and to allocate funds for signing bonuses. Both of these strategies were supported by the County Board. The market environment remains a challenge for recruiting and retaining the skilled, talented nursing staff needed to serve clients at the CTC.