

## OPEN MEETING MINUTES

Name of Governmental Body: Wisconsin Council on Mental Health			Attending: Council members: Kimberlee Coronado, Mark Eisner, Ana Winton, Rick Immler, Pam Lano, Wendy Henderson, Chrissy Barnard, Sheryl Smith, Kevin Kallas, Jerolynn Scaggs, Jessica Barrickman, Karen Odegaard, Tim Peerenboom, Matt MacLean, Dawn Shelton-Williams  DHS Staff: Maddie Johnson, Ryan Stachowiak, Joannette Robertson, Holly Audley, Emily Jamie, Annie Larson, Teresa Steinmetz, Jamie McCarville, Andrea Jacobson, Kenya Bright, Hailey Young, Sarah Coyle, Alexa Nobis, Tim Conor  Guests: Mary Madden (pending appointment to the Council), Helyn, Laura Sumner Coon, Ramsey Lee
Date: 3/16/2022	Time Started: 10:00AM	Time Ended: 3:30PM	
Location: Zoom			
			Presiding Officer: Rick Immler

### 1. Call Meeting to Order

R. Immler called the meeting to order, and meeting attendees introduced themselves while also sharing some of the impacts regarding news of the Ukrainian war. S. Smith read the Council guidelines.

*Review and approval of the minutes of January 19, February 16<sup>th</sup>, and February 23<sup>rd</sup>, 2022 (Attachment 2, 3 and 4)*

**A. Winton made a motion to approve the minutes from January 19, 2022.**

**K. Coronado seconded the motion.**

**The motion passed with the suggested edits.**

**C. Barnard made a motion to approve the minutes from February 16, 2022.**

**J. Barrickman seconded the motion**

**The minutes passed with no suggested edits. J. Scaggs and K. Coronado abstained.**

**S. Smith motioned to approve the meeting minutes from February 23<sup>rd</sup>, 2022.**

**A. Winton seconded this motion**

**The minutes passed. Tim Peerenboom, J. Scaggs, and K Coronado abstained.**

### *Announcements*

M. Johnson welcomed M. Madden to the Council and M. Madden noted her appointment is still pending. M. Johnson mentioned that S. Erlandson's appointment is also still pending and that she is not sure if B. Michel's appointment paperwork has been processed yet.

C. Barnard shared information on a [NAMI WI conference coming up in the Wisconsin Dells](#). K. Coronado shared information on the 2022 [Together for Children Conference](#) – April 12-15, online, Social Justice breakout rooms (topics: sex trafficking, child abuse, online dangers, cohesive control)

K. Coronado also shared the following announcements via email:

[Angelina Jolie on Violence Against Women Act reauthorization: The system is 'unbelievably broken' \(nbcnews.com\)](https://www.nbcnews.com/angelina-jolie-violence-against-women-act-reauthorization-the-system-is-unbelievably-broken-1234567890)

"The VAWA Reauthorization Act of 2022 will expand prevention efforts and protections for survivors, including those from underserved communities, and will provide increased resources and training for law enforcement and our judicial system," Biden said in a statement last month when the bill was introduced. "It will strengthen rape prevention and education efforts, support rape crisis centers, improve the training of sexual assault forensic examiners, and broaden access to legal services for all survivors, among other things."

Biden on Tuesday touted the reauthorization of VAWA at the spending bill signing, saying that he "law has saved lives, and that's helped women rebuild their lives and make children a heck of a lot safer."

"Tribal courts will now be able to exercise jurisdiction over non-Native perpetrators of sexual assault and sex trafficking," Biden said. "And we're providing more support for legal services and for law enforcement to get the training they need to help handle the trauma survivors are experiencing." [Biden to mark reauthorization of Violence Against Women Act at White House event | News | albanyherald.com](https://www.albanyherald.com/news/biden-to-mark-reauthorization-of-violence-against-women-act-at-white-house-event)

"Kayden's Law, in VAWA, takes the much-needed steps to improve our response to the well-documented, widespread failure of state courts to protect children in custody proceedings" Rep. Brian Fitzpatrick, Pennsylvania

R. Immler shared that he presented to the NAMI Public Policy Committee in early February a summary of a 25 year history of commission and reports as well as access, equity, and strategic planning.

#### *Public Comment*

Helyn, a member of the public shared in the zoom chat "I am in Waunakee and we are experiencing an influx of refugees from Nicaragua We will be focusing on figuring out how to support mental health needs for them, welcomes any suggestions." R. Immler mentioned that T. Peerenboom may be a good resource from Wisconsin Department of Public Instruction (DPI).

## **2. Division of Care and Treatment Services (DCTS) and Department of Health Services Secretary's Office Briefing and Updates**

K. Odegard provided an update from the Department of Health Services Secretary's Office:

"Thank you for your follow-up letter and specific questions from the Wisconsin Council on Mental Health's letter that accompanied the Mental Health Block Grant application in August 2021. We appreciate our partnership to work to improve our state's mental health system.

We expect to provide a written response by the end of this week.

While I won't be reading the full response with you today, I did want to walk through the questions you asked and few high points of our response.

You shared a variety of questions around three key topics:

1. **Data and accountability for expenditures and outcomes**
2. **Funding, and**
3. **Systemic Challenges.**

#### **Data**

Within the Department of Health Services (DHS), we are constantly looking for ways to leverage our data systems to guide our policy and programmatic decisions, and we recognize that there are areas where we could improve our efforts to integrate data.

**You raised some of the challenges of relying on county-based Program Participation System (PPS) data related to utilization of mental health services and explained that other states were shifting to systems more focused on Medicaid data.**

- DCTS Bureau of Prevention, Treatment and Recovery (BPTR) currently have the capacity to link PPS data with Medicaid data to perform analyses that inform policy and program decisions. For example, DHS released a report in 2021 on “Differences in Crisis Services and Psychiatric Hospitalizations across Race and Ethnicity,” which leveraged both of these datasets. This report has been used to inform our work to bolster crisis services across the state.
- Our system for integrating data remains largely manual; however, efforts are underway to streamline this work. The letter shares some of these efforts and the timeline for implementation.

**You asked about the quality of data gathering related to behavioral health services in county jails and other correctional facilities—specifically, what is being done to improve data quality and to understand variability in services across counties. You also asked if there are plans to improve the quality of data on access to care for these populations.**

- The Department of Corrections (DOC) would be in the best position to answer your questions about the quality and availability of data on behavioral health services offered in county jails and other correctional facilities, and what is being done to address variability more broadly.
- Within DHS, the Bureau of Community Forensic Services runs programs that support individuals who are transitioning from prisons back into the community or individuals that are preparing to stand trial, but DHS does not have direct authority over the broader set of behavioral health services that are delivered to individuals in county jails and other correctional facilities.
- We would be happy to work with you to schedule a follow-up conversation with DOC and members of our staff to discuss services offered, datasets currently available, and how the Council might access this information to inform its recommendations. And thank you to Dr. Kallas who has offered to help pull this right folks together from DOC.

**You asked whether there is an effort to understand and reduce the variability among counties in behavioral health services provided.**

- The Department strives to build and support behavioral health programs across the state so that all those who need services are able to access them in a timely way. At critical junctures in the past few years, the Department has commissioned analyses on county behavioral health services and variations therein, and these targeted efforts were and are being used to inform policy and programmatic decisions.
- DHS does not currently have a system for tracking service utilization at the county level in real-time, and to build such a system would require significant staff resources to collect data at the state and local levels, conduct outreach, compile and analyze results, and report on the findings.
- The Department is open to discussing additional in-depth analyses in the future and would need both funding and additional staff capacity to support this type of endeavor.

**You referenced the 2019 Behavioral Health Gaps Report, which was based largely on qualitative data, and asked whether the Office of the Secretary would support a quantitative review (including the use of Medicaid data), especially as it affects diverse populations.**

- The Behavioral Health Gaps study was a comprehensive analysis of behavioral health needs in Wisconsin and aimed to build on previous assessments that relied on quantitative data from state and

federal data systems. (For example, the Mental Health and Substance Use Needs Assessments and the opioids dashboard developed by BPTR staff.)

- The Behavioral Health Gaps Report has also spurred on additional quantitative analyses, including the previously mentioned report “Differences in Crisis Services and Psychiatric Hospitalizations across Race and Ethnicity.”
- At some point in the future, especially as the current results become more outdated, the Department would support another comprehensive review of behavioral health needs across the state, with a special focus on needs among marginalized communities. Additional funding and staff capacity will be necessary to support this type of effort.

**You asked whether the Office of the Secretary would support an effort to determine why Wisconsin’s rates of identifying substance use disorders in youth and adults are lower than national averages and what the barriers are to accessing services.**

- The Department is focused on improving efforts to identify, prevent, and treat substance use disorders in youth and adults and address barriers to accessing care.
- Using federal block grant funds, opioid settlement dollars, and various discretionary grants throughout the state, we have created funding opportunities for counties, tribes, non-profit providers, first responders, recovery community organizations, and treatment providers to implement strategies across the continuum of care to address substance use disorders, including initiatives to distribute NARCAN, establish new peer-run respite centers and recovery coaches, and build infrastructure for the administration of medication assisted treatments via telehealth.
- Wisconsin was recently chosen by Bloomberg Philanthropies to partner on their opioids overdose prevention initiative.
- DHS recently held a dozen listening sessions with hundreds of participants from throughout the state to help identify priority projects for this initiative.

## Funding

**You asked whether it is a priority to improve the access, data, and quality of behavioral health services in Medicaid managed care organizations (MCOs) and qualified health plans.**

- The Department continuously works to improve access, data, and the quality of behavioral health services in Medicaid managed care organizations and qualified health plans. Our written response provides details about the DMS Bureau of Quality and Oversight's annual network adequacy analysis.

**You asked if utilizing Medicaid funding to maintain or increase community psychiatric bed capacity was a priority in Wisconsin, and, if so, what is occurring.**

- Ensuring access to crisis services has been and remains a top priority for the Department.
- We have made significant investments and advanced budget proposals focused on supporting the entire continuum of crisis services, with the goal of increasing psychiatric bed capacity for those that need it and improving access to community-based resources to limit preventable psychiatric hospitalizations.
- DMS and DCTS are working together to better leverage Medicaid funding for these crisis-related initiatives.

**You asked whether the Office of the Secretary would endorse more formalized support to WCMH in the form of policy analysis or supporting the formation of a Diversity Committee.**

- The Department does not have additional capacity to provide policy analysis for boards, councils, and committees at this time.
- The staffing support provided WCMH is within the expectations set forth in statute and the bylaws.

## Systemic Challenges

**You asked whether there is potential for DHS taking a leadership role in a comprehensive review of systemic changes to Wisconsin's public mental health "system."**

- Based on previous gap analyses, we know that too many Wisconsinites continue to experience a lack of access to and gaps in mental health care.
- The Department is leveraging all available resources, authority, and staff capacity to address these gaps in care—some of which are long-standing and some of which were precipitated by the pandemic—and we are focused on the immediate task of connecting people to necessary care.
- Because our attention is focused on these emergent needs, the Department is not in a position to lead a long-term comprehensive review of the entire public mental health system.
- As Assistant Deputy Secretary Williams shared with you in January, we would look to WCMH and other advocates to work together to explore strategies that allow the state to maintain the critical services we provide under the current system while building a bridge to the future state to which you aspire.
- To this end, we encourage you to consider how the upcoming budget could support a broad community coalition to undertake this type of assessment and related work.

**You asked if the Office of the Secretary was concerned about the lack of integration between the mental health and substance abuse councils and whether there is a potential to review structures. This relates to another question you've raised to the Secretary's Office in advance of today's meeting about whether there is a role the SO can have in helping organize collaboration across councils.**

- We would welcome suggestions from the State Council on Alcohol and Other Drug Abuse (SCAODA) and WCMH about how the two councils could effectively collaborate. It is important to note that any changes to the structure of either or both councils would require legislative action and statutory changes
- The same would be true for collaboration with any councils. We would welcome suggestions from WCMH and any other council about how they could effectively collaborate.

**Finally, You asked whether there is an office that evaluates and coordinates suicide or mental health prevention efforts within DHS and the Department of Children and Families (DCF).**

- Mental health and suicide prevention encompasses a wide range of activities including services in primary care, public health, schools, in-home services and others. Given this, the Department's prevention work spans several divisions and offices and involves collaboration with DCF, the Department of Public Instruction (DPI), and the Office of Children's Mental Health.
- Within the Department, DCTS and DPH work cooperatively on the suicide prevention plan, reporting, analysis, and contract/initiative development. Two of those upstream mental health prevention initiatives are Resilient Wisconsin and our State Health Improvement Plan (SHIP), Healthy Wisconsin."

K. Odegaard also discussed the DHS Thank you Tour: Moving Forward Together in Partnership for Tony Evers. She stated this Tour is meant to thank those across Wisconsin on the COVID-19 frontlines. DHS. The Thank you tour recognizes that COVID isn't over, but Wisconsin is doing better. There is also a new webpage to thank individuals on the website. Join us in giving thanks and appreciation online to your heroes of the COVID-19 response by visiting the DHS website at: <https://www.dhs.wisconsin.gov/covid-19/thank-you.htm>.

R. Immler thanked K. Odegaard for their feedback and asked what is the capacity of the system to do things? He additionally stated that the pandemic showed some limitations and how hard government is working. He also stated this letter has potential to serve as budget recommendations.

H. Audley shared all good news, specifically that Mendota Mental Health hired a new director, Amy Jameson. Additionally, the Bureau hired E. Jaimie as the new ARPA Coordinator. K. Odegard mentioned on the thank you tour next week; they are visiting the Mendota Mental Health Institute. Additional updates from H. Audley include that the Mendota Juvenile Treatment Center is offering services to young women for the first time. Additionally, Wisconsin is using the National Guard to help fill CAN positions at facilities. Finally, facilities are required to have 100% of staff fully vaccinated at the end of March 2022 and individuals not vaccinated will be let go.

T. Steinmetz stated that the Bureau is in the process for recruiting for 13 vacancies (this number is in line with state and national workforce shortages). Additionally, the Bureau has hired ARPA related positions to work alongside T. Steinmetz as Bureau Director in helping manage the 50 million dollars of ARPA supplemental funding. T. Steinmetz also stated there is a current 10 million dollar budget to create urgent crisis care facilities. The Bureau has asked for administrative rule making authority and was allocated 10 million of 12.2 million requested. Appropriations need to go back to the Wisconsin Legislature Joint Finance Committee to develop a plan for funding.

The Council took a five-minute break.

### **3. Review Strategic Planning findings and discuss how findings relate to State Budget priorities**

J. Barrickman provided an overview of the Council's Strategic Planning process including working with consultant Yengyee Lor, creating a survey to initiate conversation, and having a full day of strategic planning. J. Barrickman mentioned that the strategic plan will be used to consider biennium budget recommendations. Council members shared that the strategic planning day was a positive experience.

R. Immler shared his screen and shared a tracking sheet (cross walk) for potential strategic priorities/budget priorities. R. Immler stated that he reviewed the DHS budget priorities and considered these priorities in the cross walk. R. Immler also looked at Governor Evers budget priorities and the past Council priorities. R. Immler stated this budget cross walk is intended to be a resource for Committees and Council members. The Council discussed the cross walk. K. Coronado asked if input from other Councils can be added and R. Immler stated these are not finalized recommendations. R. Immler stated that it is important for Council members to work to bridge gaps between other councils.

The Council discussed potential means for editing the document and the Council discussed the pros and cons of using Google docs. K. Coronado mentioned in the zoom chat that this system is a great way to keep historical record. K. Coronado asked how documents are shared for historical record. R. Immler stated that letters sent to legislators are public documents. R. Immler also stated documents can be added to the Council website. J. Barrickman stated that her IT person can create a google document. S. Smith stated she could work on reformatting the excel spreadsheet.

### **4. Lunch Break**

The Council took a lunch break

### **5. Strategic planning, budget process, and future informational zoom meeting discussion**

T. Connor stated he works as a mental health evaluator and is providing an update on the PPS replacement system.

Laura shared in the zoom chat "As a member of the community and a group interested in racial justice issues, I am most interested in having data about referrals for mental health services that come from law enforcement agencies, particularly County Jails. I would want to see race, ethnicity and gender included in what's collected."

R. Lee shared he works with the Governor's Committee for People with Disabilities. The Council discussed having a more in-depth conversation with the Adult Quality Committee on the PPS presentation. K. Coronado stated there are individuals who qualify for services with delinquent children, not children with disabilities. She

stated that these services do not meet the needs of children with disabilities, and she would like to see the data on this information.

C. Barnard asked if the data captures who doesn't receive services. T. Connor mentioned that the focus groups can discuss this question more. A. Nobis asked if they could re-run a report in the functional screen database. T. Connor said yes for those who are screened. M. Johnson stated that more folks can discuss this topic at the Adult Quality Committee.

R. Immler shared a PowerPoint on budget priorities and strategic planning priorities. R. Immler expanded on recommended elements for the budget process including looking at GPR funds, incorporating accountability, reducing costs to county property taxpayers, and considering the needs of State employees. R. Immler mentioned if you are taking the lead on a budget priority, it is important to cultivate a connection with key Legislators. Helyn, a member of the public asked why adding Full Time Equivalent (FTEs) positions at the state can be such a challenge.

T. Steinmetz stated that getting an FTE allocated to a state department needs to go through the legislative process. H. Audley stated that many times budget priorities are submitted with requests for additional staff and sometimes the budget priorities are approved without additional staff so there are less FTEs to manage additional funds. M. Madden asked if you could subcontract a position with another organization and T. Steinmetz said yes, some positions are subcontracted through the University, but the state generally does not have excess funding (there are not excess funds).

Laura (member of the public) shared in the chat "I am a representative from the Racine Women for Racial Justice, and we are concerned about the high incarceration of people with mental health concerns and the racial disparity of people of color with mental health issues or crisis who are incarcerated. We also struggle with access to mental health here. Anything that you advocate for on these points in the budget, we and our local partners would be happy to join with you as advocates. We recently had a person of color in a mental health crisis die in the custody of the county jail. The cost we spend on law enforcement and the high population of people with mental health issues in our jails and prisons is enormous. Shifting that investment to prevention and care should give us cost comparisons that would likely be beneficial."

W. Henderson mentioned it is important to put forward proposals with accurate budget and staffing levels as it is important for legislators to understand the number of resources that are needed to do the work.

The Council took a five-minute break.

## **6. WCMH Committee Reports, Discussion, and Consideration of Motions**

### **a. Executive Committee**

M. Johnson provided an update on the Mental Health Block Grant report and stated there was a copy of the report in the March meeting materials for the Council to review.

R. Immler stated that there will be an open Council chair position in June. R. Immler also discussed the potential of creating co-chair positions for the Council by amending the bylaws. R. Immler stated there will no longer be a zoom presentation on April 20<sup>th</sup>, but that there will likely be a presentation on June 15<sup>th</sup>. A. Winton said she cannot be the chair of the Council with her current workload at her job.

### **a. Adult Quality Committee (AQC) – Lynn Harrigan and Kristin Welch**

S. Smith shared updates as L. Harrigan and K. Welch were not at the meeting. S. Smith stated the AQC is looking at the problems associated with provision of adult services such as health care equity, peer services and integration into crisis services. S. Smith stated the Committee also discussed the potential for having a legislator on the WCMH. S. Smith mentioned the Committee is also looking at what is quality and how do we measure it. R. Immler stated State Council on Alcohol and Other Drug Abuse (SCAODA) has legislators based on statute and the WCMH does not.

b. Children and Youth Committee – Phyllis Greenberger and Amy Polsin

K. Coronado provided updates as P. Greenberger and A. Polsin were not present at the meeting. K. Coronado mentioned that the Committee has been discussing School Resource Officers. R. Immler mentioned that A. Polsin is coordinating a workgroup to work on budget issues.

c. Nominating Committee – Kimberlee Coronado and Jerolynn Scaggs

K. Coronado mentioned that February's Nominating Committee meeting was canceled, so the updates may be similar from January. K. Coronado and J. Scaggs met to create a to-do list and that the next meeting is March 21<sup>st</sup> 3:30-5:00. K. Coronado also stated there is one provider and one advocate position open on the Council. K. Coronado also mentioned that many three year terms are ending soon and M. Johnson stated she will reach out to these Council members to see if they would like to be appointed to the Council for another term.

d. Criminal Justice Committee – Tamra Oman and Tara Wilhelmi

R. Immler mentioned that the CJC is looking at individuals not receiving mental health services in the criminal justice system.

K. Odegaard provided an update on the process of appointment to the Council and the appointment process for boards and Council appointments and reappointments in general. K. Odegaard stated there is a form for DHS staff to complete for the Secretary's Office when there are potential applicants being considered for appointment or Council members are being considered for re-appointment. K. Odegaard mentioned that the DHS Secretary's Office is working to ensure that all parts of the state are represented on councils. M. Johnson stated that S. Smither's application for re-appointment has gone through the Secretary's Office. R. Lee, a member of the public, stated that there is opportunity to get involved in the Governor's Committee on Access and Equity.

e. Legislative and Policy Committee – Barbara Beckert and Brian Michel

- i. Motion for consideration: the Legislation and Policy committee requests that the Wisconsin Council on Mental Health request that Secretary-designee Timberlake and Governor Evers pursue budgetary support for increasing access to Dialectical Behavior Therapy (DBT) in Wisconsin.
- ii. Motion for consideration: the Legislative and Policy committee requests that the Wisconsin Council on Mental Health write a letter to the Joint Finance Committee to release the \$10 million in funds for crisis services.

The Council tabled the two above motions as the Council did not meet quorum. R. Immler shared that C. Barnard shared support for DBT.

## 7. Adjourn

The meeting adjourned at 3:30PM.