

OPEN MEETING MINUTES

Name of Governmental Body: WI Council Mental Health Criminal Justice Committee			Attending: Nycki Wallsch, Dennis Hanson, Matt MacLean, Mike Soukup, Mark Eisner, Christopher Zahn, Brian Michel, Tara Wilhelmi, Kevin Kallas, Ex officio Rick Immler Advisory Committee: Suzzane Williams guest: Linda Palmer
Date: 2/9/2022	Time Started: 10:11am	Time Ended: 11:50am	
Location: zoom meeting			Presiding Officer: Tara Wilhelmi, co-chair
Minutes			

1. The meeting was called to order by co-chair Tara w. and minutes were approved with a motion by Matt MacLean and a second by Dennis Hanson.
2. a. State budget process was explained by Brian Michel and Rick Immler. The committee has until the end of May to put forward priorities to the Department of Health Services (DHS) and the Governor's office. Rick Immler, Council Chairperson, has been consulting with the Office of the Secretary of Health Services on the Council's priorities. This information has been made available in power points, is posted on the council website and will be sent to committee members.

Brian Michel shared there are bimonthly meetings of the Council and the Office of the Secretary of Health Services. Barbra Becker of Disability Rights Wisconsin staffs the meetings. The Office of the Secretary has been very receptive to the Council.

b. Legislative updates: The bill tracking document will be sent to criminal justice committee members. Several bills were mentioned including:

AB815/SB791 TAD (Treatment alternatives and Diversion) expand to any mental illness. This has a January hearing with 40-50 people in attendance. Mike Soukup shared it seemed to have bipartisan support. Very exciting.

AB918/SB873 Restoration of Voting Rights. Beyond probation period. Push people into bankruptcy.

AB627 Terminating Parental Rights for persons incarcerated. Still in active status. The WCMH sent a letter opposed to this bill.

AB838/SB856 Reduces Judicial discretion-There are number of concerns here.

AB960-Battery-threat to healthcare provider.

c. Updates from Mental Health Council. Matt MacLean shared, as a person with lived experience, maintaining voting rights important. Getting people back into the workforce is important. Rick Immler gave an update on strategic planning meetings. Additional meeting appointments and information will be shared with this committee. Look at the outcomes and levels of care, primary care would be infant mental health and school health. Early intervention. System and workforce capacity and in jail services based on capacity, payment and reimbursement. Minnesota has half of the jail and prison rate and half of the cost. We lack data. The Wisconsin Council on Mental Health has a bigger mandate to look at mental health policy. The take home message for 25 years we have had a fragmented system, and different eligibilities. CCS (Comprehensive Community Services) leverages Medicaid. Why hasn't this brought change? Merge strategic plan with accountable communities. Next strategic organizing meeting on February 16th 11:30 and a group meeting is on February 23 potential time 8-4:30PM. Appointments will be shared in separate e-mails. Timing is everything on the state budget.

D and e. Strategic plan. Members discussed key concepts and priorities to include in the council and committee strategic plans including the following:

Group 1: Continuity of MH services once released, more MH services in the jail system,

Crisis intervention and TIC training for staff in the jail system

Peer Specialists, severe difficulty in hiring (few applicants & not qualified)

Would like to see more detailed more specific measurable outcomes

Group 2: Address Re-entry needs/resource gaps

Peer support as a key to transition support
 Help support peer support programs
 Increase access, decrease barriers
 Diversion
 Additional CIT workers & training
 Increase TAD funding, increase access to MH courts\
 Re-entry Peer Specialists

Group 3: Recruitment and Retention (i.e. Psychiatry) wage gaps

Is MA enrollment still a priority?

A holistic approach to link re-entry transition support services/resources

Not enough appropriate housing options

Standardization of release planning expectations

Lacking good quantitative data on gaps resources in the community

(access, root causes)

Unidentified co-occurring MH/SUD

Review SAMSHA data on low rates of BH services in prisons and jails (accuracy and national norms comparison)

Top Priorities

Workforce Recruitment, Retention & Training

- Re-entry CPS
- DOC MH workers
- DOC corrections officers
- DOC healthcare staff (RN)
- CIT & TIC training
- Probation/Parole Agents
- Coordinated interdisciplinary/inter vocational case management

Members shared vision or model of a core benefit set and getting consumer what they need, where they are before they deteriorate to qualify for a program. Another area: What does the Council need? Better data, policy analysis, what are the best practices?

f. Public comment. No public comment was shared.

3. Agenda items for the April 13th meeting. Continue the strategic plan process, work groups/membership recruitment for this group, budget status, and action steps.

4. Meeting adjourned at 11:50am