Meeting of the Wisconsin Council on Mental Health (WCMH)
July 18, 2018
10:00 am to 3:30 pm
Division of Vocational Rehabilitation, 1801 Aberg Avenue, Madison, WI and Via Conference Call

MEETING MINUTES

Members of the WCMH in Attendance: Charlotte Matteson, Tracey Hassinger, Matt Strittmater, Inshirah Farhoud, Sheli Jo Metzger, Mishelle O’Shasky, Karen Iverson Riggers, Bonnie MacRitchie, Tom Engels, Rick Immler (via teleconference), Kimberlee Coronado (via teleconference)

Department of Health Services (DHS) Staff in Attendance: Michael Christopherson, Sarah Coyle, Joyce Allen, Ryan Stachoviak, Cory Flynn, Kenya Bright, Holly Audley

Guests in Attendance: Joanne Juhnke, Crystal Hester, Bruce Christensen

1. Call Meeting to Order

Read WCMH guidelines for conduct of meeting

C. Flynn read the guidelines.

Review and approval of the minutes of May 16, 2018

K. Iverson Riggers moved to approve the minutes of May 16, 2018.
S. Metzger seconded the motion.
Motion carried, minutes approved.

Announcements: Opportunity for Council members to make general announcements

K. Iverson Riggers announced that she will resign from the Council after the July Council meeting.

Public Comment

Joanne Juhnke from Wisconsin Family Ties (WFT) provided advocacy regarding the Community Mental Health Services Block Grant (MHBG) funding. J. Juhnke discussed the work done in Wisconsin by WFT to serve parents of children with mental health needs. As a family run organization WFT can provide support as Parent Peer Specialists. J. Juhnke noted that children’s mental health needs are on the rise, and with the expansion of CCS there is an increase in the number of people seeking assistance from WFT. Given the increase in needs across the state WFT asked that the WCMH support an increase in MHBG allocation to WFT. It was suggested that this increase be proportional to the overall increase Wisconsin received to the MHBG in Fiscal Year (FY) 2018, which
is roughly 26%. In addition to the work serving families WFT has also been among those advocates who had done extensive work to advocate for maintenance of funding of the MHBG. These advocacy efforts were key in ensuring the MHBG was not cut. In addition WFT provides leadership and support for the Council and Committees. WFT currently has 18 Parent Peer Specialists across the State. Written testimony was also provided to the WCMH (attached).

C. Hester from NAMI Wisconsin presented on NAMI Wisconsin and the NAMI Wisconsin affiliates. NAMI Wisconsin was projected to receive a reduced amount via the MHBG earlier this year due to the projected cut in the MHBG. NAMI and NAMI Wisconsin did extensive work advocating for the maintenance of the MHBG. C. Hester provided some information regarding the 2017 impact of NAMI Wisconsin’s activities. This included trainings across the state, an annual conference, the healing art show, providing individuals across the state with information and support, and the production of family resource guides. NAMI Wisconsin continues to see need for services and support across the state. NAMI Wisconsin requested that the WCMH support an increase for an increase in MHBG funding for those organizations that would have been subject to a cut in funding proportional to the increased MHBG award. NAMI Wisconsin could utilize an increase in funding in several ways including increasing services provided across the state, the hiring an LTE research analyst, expansion of the NAMI Wisconsin annual leadership summit, print additional resource guides, and to provide mini grants to local affiliates. NAMI Wisconsin requested an increased funding amount of roughly $56,000 utilizing the carryover funding.

C. Matteson noted the importance of NAMI for her family and the value of the support that was provided. The services provided are of key importance for families and are very much so complimentary to services provided through community mental health programs.

K. Iverson Riggers thanked both organizations for their work and for their comments. J. Juhnke further discussed WFT’s efforts across the state including efforts to address suicide prevention, parent peer specialists, and family to family work. C. Hester noted the importance of having organizations in the community in which families, parents, and consumers have key roles and leadership.

M. O’Shasky asked how the WFT is involved in current statewide efforts around Parent Peer Specialists. J. Juhnke noted that there have been some disagreements from WFT as to the State’s direction of the Certified Parent Peer Specialist program. One concern has been the emphasis of expansion versus fidelity and the embracing of more of a medical model. WFT has agreed to have some staff be trained in the curriculum as WFT does not want to be entirely separate from the current trainings, but the organization still has certain concerns with the curriculum.

2. Discussion of the Community Mental Health Services Block Grant

M. O’Shasky moved MHBG discussion up in the agenda for discussion. J. Allen provided a presentation on the proposed utilization of the increase Wisconsin received in Fiscal Year (FY) 18 through the MHBG funding. In drafting the proposed budget the DCTS had reviewed previous recommendations from the Council, the Needs Assessment, prior plans, and proposals that have been developed. States have been instructed to view this increase as a one-time increase and the funds must be utilized by September 30, 2019. Given these limitations
the State has worked to identify areas of funding that support goals but also identify areas through which funding could be utilized by September 30th of 2019.

Proposals and areas that the Council has recommended and supported in the past have been included in the funding proposal including a Mental Health gaps analysis, and additional funding for suicide prevention utilizing the Zero Suicide Model. Also included are funds to provide technical assistance for special populations, looking to address underserved populations in the state.

The DCTS also proposed utilizing funding to support the SOAR program. While the MHBG has provided funding to this program in the past, the SOAR program lost Community Services Block Grant funding when it was transferred from DOA to DHS. The DCTS proposes utilizing funding to augment current MHBG funding.

Certified Peer Specialist training has been supported as the DCTS wants to continue to provide ample training this coming year. There is continued interest across the state in receiving training and additional funding will help reach this goal. In addition, the DCTS has reached out to the WFT to see if they would be willing to provide additional training with additional funding.

T. Engels joined the meeting at 11:10 am.

J. Allen and K. Bright provided information on the application and selection process for Certified Peer Specialist trainers. K. Bright noted that, due to need, the last announcement for trainers went out to recruit Substance Abuse trainers, and that announcement when out to substance abuse-focused agencies.

J. Allen described a budget proposal to provide Crisis System improvement funding. These funds would be to help counties improve the crisis system and divert people to community based services. This past year’s learning collaborative that DHS has discussed at WCMH meetings has been very successful in identifying best practices. MHBG dollars would be provided via mini grants to help counties implement these best practices that were identified.

J. Allen discussed a budget item that is proposed to provide smoking cessation technical assistance to provide smoking cessation services for people with a Serious Mental Illness (SMI). This proposal would be to collaborate with the University of Wisconsin Center for Tobacco Research and Intervention (UW-CTRI). B. Christensen of the UW-CTRI provided a summary of the proposed model. People with SMI smoke at rates much higher than the general population and experience a great number of tobacco related illnesses. These illnesses are a large contributor to the 25 year loss of life that people with SMI experience on average. Training would be provided to CCS and CSP staff. Training would center on treating tobacco and how to motivate people to quit. The proposal is to develop an online training module and then to convene learning sessions across the state, and practice those interventions. T. Hassinger and M. O’Shasky expressed concerns over utilizing the MHBG for smoking cessation.

J. Allen discussed a funding proposal to increase funding for Individualized Placement and Support (IPS). This past year additional dollars were invested in IPS training which has allowed for an increase in the number of counties that can be trained and supported in IPS. The increased funding will allow for increased IPS training staff.
Of the MHBG, 10% must be allocated to Early Serious Mental Illness (ESMI). The majority of the funding will be devoted to Coordinated Specialty Care services. An additional amount would be utilized to provide Technical Assistance for ESMI, providing technical assistance to community based providers to better serve youth and young adults experiencing ESMI utilizing evidence based concepts.

K. Iverson Riggers noted concerns regarding the one time funding and whether it will be impactful. SOAR, which provides valuable services, would benefit from ongoing additional support, beyond the one time increase of MHBG dollars. R. Immler recommended that the WMCH support balanced services to ensure people have access to high quality services. Many clinicians are in crisis in rural parts of the state and need support.

K. Coronado discussed the perspective of a parent and family in crisis. Families often don’t have access to services to support the needs of the family. Access to services that would support the whole family would be welcome for many families. Given the needs of families, spending MHBG dollars on smoking cessation does not seem to be a high priority.

M. O'Shasky discussed areas of Criminal Justice. M. O'Shasky suggested that dollars should be directed toward families and individuals in the community and an investment in the criminal justice system.

T. Hassinger discussed her personal experiences with mental illness including eating disorders and the lack of services. Eating disorders are often fatal, and people experience a good deal of shame and stigma. More supports for people with eating disorders are needed. Current services are often not effective and not available for many people.

J. Allen thanked the Council for their input; the DCTS will bring back the recommendations for consideration in the MHBG budget.

3. **WCMH Strategic Planning Workgroup Updates**

WCMH strategic planning workgroups provided updates on the efforts since the past Council meeting.

*Integration with other Councils and Initiatives*

D. Kiernan presented a Partner Meeting Summary document that the workgroup had developed. The document could serve as a framework of how to present other councils or committee meetings back to the WCMH. The workgroup will continue to develop materials. It was also suggested that a recurring agenda item be added to that would prompt discussion and updates of collaboration with other groups.

*Membership*

The workgroup did not have updates, but continues to meet and work on their items.

*Position Papers and “Deep Dive” Framework*

B. MacRitchie provided a briefing and introduced a Deep Dive/Strategic Planning Framework and various process steps that could be included. The workgroup included a framework on how a deep dive could occur over the course of several Council meetings. The first meeting could be an environmental scan, followed by an
exploration of methods and solutions, and lastly a meeting to craft recommendations. It is important to ensure that when the Council is learning about topics that there is an end in mind and is outcome focused. Members suggested past Council actions, motions, and positions would be beneficial to include for consideration.

Advocacy and Rapid Response

No update was made by the workgroup. Members of the Council agreed to table this workgroup for now until more capacity is available on the Council.

Bylaws

M. O’Shasky and M. Strittmater provided an update on recommended changes to the Council Bylaws. Language changes were made throughout to be more person centered. Additional edits were made to ease state representative involvement by allowing Secretary’s to select a permanent delegate. More detail will be included regarding CLAS standards, ethics, and conflicts of interest.

K. Iverson Riggers suggested that the workgroups provide additional updates at the September meeting.

4. Working Lunch

T. Hassinger left the meeting at 12:00pm.

5. WCMH Committee Reports, Discussion, and Consideration of Motions

Executive Committee

M. O’Shasky provided an update, noting that the Executive Committee had discussed strategic planning, the fall tour, and planning for the current Council meeting.

Children and Youth Committee (CYC)

B. MacRitchie discussed recent CYC efforts. The CYC had discussed the MHBG most recently. The Committee also spent time on workforce development issues. The group plans to do a more narrowly focused environmental scan to continue addressing this topic at the next meeting. The CYC plans to hear from Wisconsin Family Ties, White Pine Consulting, and others regarding the topic.

Legislative and Policy Committee (LPC)

K. Iverson Riggers introduced a motion from the LPC to draft a letter to Rep. Duffy (R-WI) who chairs the House Subcommittee on Housing and Insurance opposing HUD’s “Making Affordable Housing Work Act” and Rep. Dennis Ross’s (R-FL) “Promoting Resident Opportunity through Rent Reform Act” and urge him not to move them forward.

K. Iverson stated that as of right now neither bill have received a bill number and Rep. Duffy has not been keen on moving such a proposal forward at this time. However, the Wisconsin Council on Mental Health should use their platform to vocalize how these proposals would significantly impact Rep. Duffy’s constituents with disabilities, including mental illness, here in Wisconsin. Several disability organizations across the country have
opposed these proposals, including 32 organizations that signed on to a joint letter of the Consortium for Citizens with Disabilities.

**Motion to draft a letter to Rep. Duffy (R-WI) to oppose HUD’s “Making Affordable Housing Work Act” and Rep. Dennis Ross’s (R-FL) “Promoting Resident Opportunity through Rent Reform Act” and urge him not to move them forward carried. T. Engels and D. Kiernan abstained.**

K. Iverson Riggers announced that the LPC has a person who is interested in joining the LPC, Alice Sykora. She has attended two meetings and would be a good addition to the LPC.

**M. O’Shasky appointed Alice Sykora to the Legislative and Policy Committee.**

The LPC continues to work on budget priority planning. The LPC will continue to provide the WCMH with new versions of the document moving forward. The Council approved the draft of the document and now the LPC is looking to further refine the document. The hope is that various committees and members can meet with other departments to discuss budgets. There is a section at the top of the document that highlights key guiding principles that would be included in all overall priorities.

**Criminal Justice Committee (CJC)**

M. O’Shasky provided a briefing on the CJC. The CJC did not meet this past month but did have a well-attended meeting in Milwaukee the prior month. The committee plans to continue meeting in Milwaukee on a periodic basis.

**Nominating Committee**

K. Iverson Riggers discussed three people who have applied. All would be good candidates for serving on the Council. Members of the Council suggested that more work be done to determine which role each person would be best suited to represent on the Council.

6. **Break**

7. **WCMH Fall Tour Planning**

Members of the Council discussed the fall tour. The following topics and questions were suggested as overall areas for the presenters to discuss:

1. What services are provided in the community?
2. What are your agency’s gaps, barriers, and successes?
3. Given the role of WCMH, what would you ask of us?
4. What issues do you see more broadly in the community?
5. As a rural community what are challenges unique to your community?

Other more specific discussion topics could involve the impacts of mental health reimbursement rates. New Horizons North could discuss involvement in the Zero Suicide implementation, CCS, and CSP. Northlakes community clinic is a Federally Qualified Health Clinic.
The tribal representatives could discuss those services offered by the tribal health centers, and the tribe’s view and approach to mental health. What is difficult, what are they proud of? How do they view their integration with non-tribal agencies or organization? When do they consider referring tribal members to other supports?

Questions for the Ashland School District could include the following. How did the grant help you, what services did you provide with the funding? What is your plan for how it will be sustained? Could it be a startup plan for other areas of the state?

8. Division of Care and Treatment Services Briefing and Updates

Members of the WCMH provided additional feedback regarding MHBG funding. Sheli Metzger expressed her opinion that Smoking Cessation should not be included in the MHBG budget. K. Iverson Riggers noted that she would be in support of additional funding to be directed to peer-run and family advocacy services. M. Strittmater noted that smoking is a large issue and impacts a large loss of life, but the importance of access to mental health services cannot be understated. M. O’Shasky voiced her opinion that Smoking cessation should be funded through other resources, rather than via the MHBG. K. Bright discussed the benefits of smoking cessation model and noted that it has been peer reviewed.

Winnebago Mental Health Institute (WMHI) updates

H. Audley provided an update on the WMHI. The WMHI continues to implement a plan of correction. There will be a visit in August to revisit and review changes to those problems that were identified.

Certified Peer Specialist (CPS) program updates

K. Bright provided a briefing on the CPS program. The BPTR plans to create an advisory committee that would include employers. The new curriculum has been completed and so far 21 trainings have occurred, 322 people have taken the exam and there are 179 new CPS who have passed the exam. Agencies across the state are also looking to bring in additional trainings. Information is available on the Wisconsin Peer Specialist website: http://www.wicps.org/.

9. Call for future WCMH agenda items

The following agenda items were noted:

- Continued updates on the Certified Peer Specialist program
- Feedback from the Certified Peer Specialists
- Presentation from Access to Independence

10. Adjourn

Meeting adjourned at 3:42pm.