

Human Service Model Feasibility Task Force

May 29, 2013 1:00 pm
North Central Health Care, Board Room

Meeting Minutes

Present:

Marathon County: Brad Karger, John Robinson, Gary Gisselman, Vicki Tylka,
Joanne Leonard, Ken Day
Lincoln County: Nancy Bergstrom, Randy Scholz, Bruce Giese, Mike Nelson
Langlade County: Dick Hurlburt, Robin Stowe, Kim Van Hoof, Holly Matucheski
State of Wisconsin Reps: Theresa Steinmetz
North Central Health Care: Gary Bezucha, Toni Simonson, Paula Hawkins

John Robinson called the meeting to order and roll call was noted.

Minutes

- Minutes requested to be posted to each county's website. They will be sent to Mary Palmer (Marathon), Randy Scholz (Lincoln), and Robin Stowe (Langlade) for posting.
- **Motion** Leonard, 2nd Hurlbert, to approve the minutes of the April 18, 2013 meeting, with the following changes:
 - Page 3, bullet point 7: change wording to read "Screened-in means report is found to have merit and meets the requirement for child abuse and/or neglect."
 - Page 4, bullet point 1: remove "(4-5 years)" behind Family Care.
 - Motion carried.

Facilitator Review Committee Report

- Proposals were received for the second RFP from the same two as submitted for the first request. Proposed cost went up in both cases.
- The team felt this was the best proposal, and recommends the task force retain the Nordheim Consulting Firm, including Gail Nordheim and Gerry Born. It is paid for by the reserves from the three counties.
- Question on #10: will they meet with each county? Yes.
- Question on #11: will they facilitate these meetings? Yes. Perhaps the term "staff" should be used instead of facilitator, as in staffing the meeting and bringing information to the meetings. The team will meet with them to determine the extent of their involvement once a contract is signed. It is our expectation that they will assist in answering questions that will arise with the state. They will identify what data needs to be gathered and by whom. The state reps will also have questions of this group. Teresa and Chris will be the liaisons with the different state groups. At the next meeting we will clearly define each county's expectations of the facilitators.
- Focus groups (#9) – Juvenile Justice agencies, should also include court system and district attorney's. Each county will need to identify who should be included in the focus groups. Kim, Mike and Vicki will identify a list of potential attendees.

- Timeline – the task force does not want counties to feel rushed into making a decision, so the December timeline may need to be extended – to work into the budget cycle in 2014. The deadline could be moved.
- Who will be the go-to person (project manager) for this group; the person the consultants will work with? The project manager would need to have the responsibility to get this done/follow-up outside of meetings. Gary Bezucha was designated by the task force as the POC (point of contact).
- **Motion** Leonard, 2nd Gisselman, to accept the recommendation to retain the Gail Nordheim Consulting firm. Motion carried
- Gary will execute the contract with the consultant, and report it at the May 30th North Central Community Services Program (NCCSP) Board meeting.

Child Welfare Discussion

- Staffing levels are not inclusive of children’s long term support waiver - just child protective services, staff and juvenile justice.
- Screened out cases may be referred for other/lesser services. These are about 70% of the cases referred to Social Services.
- Substantiation rate is of cases screened, those that are found to be a case of abuse or neglect.
- It is difficult to compare data between counties in juvenile justice, because it is handled so differently in each county. Formal disposition is the percentage that goes on to court.
- Age group is up to 16 for data provided.
- In order of level of care – highest to lowest – is Group care, institutional, treatment foster care, regular foster care, and correctional care.
- When there isn’t enough access to foster care, they approach family members to become foster homes, then go to surrounding counties. Lincoln County has only four foster homes; after that and family homes and surrounding counties they would place in treatment foster care which is higher cost.
- It is important to know what systems are available in the counties to use as support to avoid out of home placements.
- Juvenile Justice in Langlade County is not part of Social Services; it is part of the juvenile justice workers and the court system. They have input in these cases only if asked. The judge supervises the juvenile justice staff. In Wisconsin only Vilas, Taylor and Langlade are handled this way.
- Overall budgets broken down by category and corresponding funding sources will be brought to the next meeting.

MH, Addiction Treatment & Developmental Disabilities Programs at NCHC

- The psychiatric hospital has 16 beds, and a waiver to exceed to 20 on an as-needed basis.
- Ambulatory detoxification program has 5 beds. It is much less costly than inpatient services. It provides most of the same services, but is an unlocked unit.
- Crisis CBRF (Community Based Residential Facility) is an 8 bed unit.
- Required programs in the 51.42 statute are the psychiatric hospital, detox services, and Community Support Program (CSP).

- CSP is the most intensive outpatient service provided, and is for those individuals suffering from severe and persistent mental illnesses. It includes a high volume of medication management. We just received a multi-county certification, rather than three separate certifications.
- CCS (Comprehensive Community Services). It is proposed in the state budget to be a fully covered Medicaid service. It is a higher reimbursed service than the CSP program. Last week we also received a multi-county certification for CCS. Intensive wraparound services are provided in Marathon County, working with Social Services, to avoid out of home placements or bring back to the county current out of home placements. Our three counties are the first multi-county CCS program in the state.
- Currently piloting counseling in the schools, working with Wausau School system and have been meeting with DC Everest schools to pilot in those schools next year.
- 83% of those referred to us with an abuse issue also have a mental health issue.
- Community Corner Clubhouse program – operates Monday through Friday and all holidays. It is a heavily focused vocational program. It is on a five year plan to become a self-sustaining entity – to be a community supported resource. Assists with daily living skills, preparing for employment, business type skills training, etc. Clubhouse members and staff work together to run the clubhouse. Clubhouse members staff the front desk at the Wausau campus.
- Birth to Three services are heavily therapy driven.
- DD (Developmental Disability) clients are case managed by CCCW (Community Care of Central Wisconsin - Family Care), and we provide the services for CCCW.
- DD Services include Adult Day Services (ADS), Pre-Vocational Services, and Residential Housing Services. Residential Services has 10 locations – 5 CBRFs and 5 Supported Apartments. These are not mandated services, so no county tax levy is used. They are self supporting via contracts, primarily with CCCW.
- Aquatic Services is also self-sustaining as of this year.
- Request of Toni Simonson to provide detailed client numbers, staffing numbers, costs for child service areas, up to age 18, and where NCHC believes there are opportunities to economize services. What are the funding sources?
- Marathon County provides its own Children’s Waiver Service program.

Future Meeting Agendas

- Introduction and scoping meeting with Gail Nordheim; take their proposal as a template and clarify scope, identifying expectations (example focus groups – who should be included), realistic timeframes
- Continue discussion on costs and potential areas of study

Scheduled Meetings

- Next meeting is June 20th from 1:00-4:00PM.

Motion to adjourn by Joanne Leonard, 2nd by Dick Hurlbert, at 3:45 PM. Motion carried.

Pdh