

## **Mental Health Redesign and Implementation Task Force Charter**

Purpose: To develop and implement a data-driven plan for the effective and sustainable redesign of the mental health system in Milwaukee County

Background and Rationale:

Mental health service delivery in Milwaukee County has been the subject of considerable research and scrutiny in recent years. Numerous public and private entities have issued reports on how to modernize and improve the mental health system generally as well as the Behavioral Health Division specifically, including (but not limited to):

- *Transforming the Adult Mental Health Care Delivery System in Milwaukee County* by Human Services Research Institute in partnership with the Public Policy Forum and the Technical Assistance Collaborative, Inc.
- Reports to the Milwaukee County Board of Supervisors from the Community Advisory Board for Mental Health
- *System Changes are Needed to Help Ensure Patient and Staff Safety at the Milwaukee County Behavioral Health Division* by the Milwaukee County Department of Audit
- *Follow-Up Report to BHD Administrator: Mixed-Gender Units* by the Gender Unit Work Group
- *Milwaukee County Executive's Mental Health Vision and Initiative* by Chairman Lee Holloway, Milwaukee County Board of Supervisors
- Reports to the Milwaukee County Board of Supervisors from the New Behavioral Health Facility Study Committee

The Board of Supervisors approved a resolution in April 2011 to create a task force charged with deliberatively evaluating and selectively implementing recommendations contained in the various reports.

Guiding Principles:

- Adherence to SAMHSA recovery principles: Self-Direction, Individualized and Person-Centered, Empowerment, Holistic, Non-Linear, Strengths-Based, Peer Support, Respect, Responsibility, and Hope
- Ensuring access to high quality services and supports in community-based settings
- Reducing reliance on emergency services and unnecessary inpatient care
- Commitment to full inclusion of consumers as well as family members and advocates
- Partnership between public and private stakeholders
- Compliance with the integration mandate of the ADA and *Olmstead v. L.C.*
- Diversity and cultural competency
- Moving beyond the medical model to a philosophy of independent living

### Scope and Boundaries:

- Included:
  - Geographic Scope: Milwaukee County (and other inpatient programs within the five-county region)
  - Focus: Redesign of Milwaukee County Behavioral Health Division services in coordination with the reconfiguration and expansion of private and State-sponsored programs and services
  - Age Demographic: Initial focus on adults (including geriatric patients) and transitional youth
  - Range of Services: Inpatient, outpatient, emergency/crisis, case management, peer support, long-term care, residential, prevention, substance abuse services, and community-based services including (but not limited to) CSP, TCM, Day Treatment, and Family Care
  - Clinical Populations: Persons with mental illness and substance abuse, including those with a dual diagnosis and/or developmental disabilities
  - Focus on vulnerable, low-income populations, including the uninsured, Medicaid beneficiaries (and dual eligibles), older adult patients, and persons under emergency detention
  - System and structural redesign of the delivery system
  - Legal and public policy changes associated with emergency detention services
  - *Interaction* with external systems
    - e.g., housing, employment, education, criminal justice, etc.
- Excluded:
  - Areas outside of Milwaukee County (excepting certain other inpatient programs within the five-county region)
  - Day-to-day operations and improvements at the Behavioral Health Division
    - e.g., staffing, TJC certification, health information technology, etc.
  - Children's mental health
  - *Redesign* of external systems
    - e.g., housing, employment, education, criminal justice, etc.

### Objectives/Deliverables:

- Review, discuss, prioritize, and implement recommendations from evidence-based plans and proposals
- Improve access to timely and appropriate mental health services
- Expand public and private community-based mental health services
- Reduce unnecessary and costly reliance on inpatient treatment
- Determine and achieve optimal capacities in public and private inpatient facilities and the Hilltop units at the BHD
- Minimize use of emergency detentions
- Improve consumer satisfaction and quality of care
- Achieve system-wide application of principles of recovery and trauma-informed care
- Increase independence, community integration, and quality of life for consumers
- Manage or reduce overall costs within the mental health system
- Garner and maintain support from the governing boards of mental health stakeholder entities, notably those represented on the Task Force
- Achieve and maintain an efficient, well trained workforce through strong recruitment, retention, and continuing education efforts

Outcome Measures:

- Expansion of community-based services
- Shift of inpatient capacity from public to private facilities
- Decreased emergency detentions
- Decreased readmissions
- Establishment of a set of common quality metrics
- Increased application of the recovery model and trauma-informed care
- Increased consumer satisfaction

Team Leadership/Membership:

- Co-Chairs:
  - Pete Carlson – Hospital Representative
  - Paula Lucey – Administrator, Behavioral Health Division
- Members:
  - Karen Avery – Consumer, Focus on Mental Illness
  - Bevan Baker – City of Milwaukee Health Officer
  - Barbara Beckert – Milwaukee Director, Disability Rights Wisconsin
  - Cindy Bentley – Consumer, Focus on Developmental Disability
  - Lee Carroll – FQHC Representative
  - Peg DuBord – Community Provider, Focus on Mental Illness
  - Sarah Fraley – State Director of Medicaid Representative
  - Scott Gelzer – Foundation Representative
  - Chris Hendrickson – State Secretary of Health Representative
  - Edith Hudson – Law Enforcement Representative
  - Jon Lehrmann – Medical College of Wisconsin Representative
  - Geri Lyday – Interim Director of Health and Human Needs
  - Tom Nowak – Community Provider, Focus on Developmental Disability
  - Larry Pheifer – Medical Society of Milwaukee County
  - Yvonne Stueber – Advocate, Focus on Developmental Disability
  - Joy Tapper – Executive Director, Milwaukee Health Care Partnership
  - Tia Torhorst – County Executive Representative
  - Brenda Wesley – Advocate, Focus on Mental Illness
  - Peggy Romo West – Milwaukee County Board of Supervisors

Related Initiatives/Teams:

- Behavioral Health Advisory Committee
- Mental Health Task Force
- Milwaukee Continuum of Care
- Community Advocates – AODA Initiative

Resources Required:

- Project management support
- Technical assistance (fiscal analysis, policy implementation expertise)

Timeframe:

- Quarterly reports to the Committee on Health and Human Needs
- Major report on implementation plans to County Board in January 2012