

Chairperson: Mary Neubauer
Vice-Chairperson: Kathie Eilers
Secretary: Shirley Drake
Research Analyst: Kate Flynn Post, (414) 391-7845
Interim Board Liaison: Jennifer Miles, (414) 257-7639

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MILWAUKEE COUNTY MENTAL HEALTH BOARD

Thursday, April 25, 2024 - 9:00 A.M.
Marcia P. Coggs Human Services Building
1220 West Vliet Street, Room 104

MINUTES

PRESENT: Kathy Bottoni, Richard Canter, Shirley Drake, Rachel Forman, Dennise Lavrenz, Jon Lehrman, Mary Neubauer, Maria Perez, LaNelle Ramey, and Amy Ridley Meyers

EXCUSED: Kathie Eilers, Kenneth Ginlack

SCHEDULED ITEMS:

NOTE: All Informational Items are Informational Only Unless Otherwise Directed by the Board.

1. **Welcome.**

Chairwoman Neubauer welcomed everyone to the Milwaukee County Mental Health Board's April 25, 2024, meeting and roll call was taken.

2. **Approval of the Minutes from the February 22, 2024, and the March 21, 2024, Milwaukee County Mental Health Board Meeting and Public Comment Budget Hearing.**

No questions or adjustments were needed to the minutes for either meeting.

MOTION BY: (Perez) Approve the February 22, 2024, and the March 21, 2024, Meeting Minutes. 9-0

MOTION 2ND BY: (Lavrenz)

AYES: Bottoni, Canter, Drake, Forman, Lavrenz, Neubauer, Perez, Ramey, and Ridley Meyers - 9

NOES: 0

ABSTENTIONS: 0

3. **Proclamations for Dr. Maria Perez, Jodi Mapp, Joy Tapper.**

Tim Schabo from the Office of the County Executive read and presented Proclamations for Dr. Maria Perez, Jodi Mapp, and Joy Tapper. Each recipient was in attendance for the honors.

This Item was Informational.

SCHEDULED ITEMS (CONTINUED):

<p>4.</p>	<p>Mental Health Board Member Appointments Update.</p> <p>Tim Schabo from the Office of the County Executive announced the appointments for the two openings on the Milwaukee County Mental Health Board (vacancies created by the resignation of Dr. Earlise Ward and Dr. Maria Perez). In the position for the adult psychologist/psychiatrist position, Dr. Ramel Smith was announced as the appointment to that role. Dr. Lynette Studer was announced as appointed to the professor in the mental health field role.</p> <p>There were no questions from the Board or public related to these appointments.</p> <p>This Item was Informational.</p>
<p>5.</p>	<p>Finance Committee Professional Services Contracts Recommendation.</p> <ul style="list-style-type: none">• Contract Amendment(s)<ul style="list-style-type: none">➤ Goodwill Industries of Southeast Wisconsin, Inc.➤ Medical College of Wisconsin Affiliated Hospitals, Inc.➤ Status Solutions, LLC <p>The Board was informed the Finance Committee unanimously agreed to recommend approval of the Professional Services Contracts to the Board.</p> <p>Board Member Ridley Meyers requested an abstention for the Medical College of Wisconsin Affiliated Hospitals, Inc. agreement and separate votes for that contract and balance of the contracts.</p> <p>MOTION BY: (Ramey) <i>Approve the Medical College of Wisconsin Affiliated Hospitals, Inc. Professional Services Contract. 8-0-1</i></p> <p>MOTION 2ND BY: (Lavrenz)</p> <p>AYES: Bottoni, Canter, Drake, Forman, Lavrenz, Neubauer, Perez, Ramey - 8</p> <p>NOES: 0</p> <p>ABSTENTIONS: Ridley Meyers – 1</p> <p>MOTION BY: (Canter) <i>Approve the balance of the Professional Services Contracts. 9-0</i></p> <p>MOTION 2ND BY: (Bottoni)</p> <p>AYES: Bottoni, Canter, Drake, Forman, Lavrenz, Neubauer, Perez, Ramey, and Ridley Meyers - 9</p> <p>NOES: 0</p> <p>ABSTENTIONS: 0</p>
<p>6.</p>	<p>Finance Committee Purchase-of-Service Agreements Recommendation.</p> <p>The Board was informed the Finance Committee unanimously agreed to recommend approval of the Purchase-of-Service Agreements to the Board.</p>

SCHEDULED ITEMS (CONTINUED):

<p>Secretary Drake requested an abstention for the Wisconsin Community Services agreement and separate votes for that contract and the balance of the Purchase-of-Services Agreements.</p> <ul style="list-style-type: none">• 2024 Agreement(s) <p>MOTION BY: (Ramey) <i>Approve the Wisconsin Community Services (WCS) Purchase-of-Services Agreement. 8-0-1</i> MOTION 2ND BY: (Lavrenz) AYES: Bottoni, Canter, Forman, Lavrenz, Neubauer, Perez, Ramey, and Ridley Meyers - 8 NOES: 0 ABSTENTIONS: Drake - 1</p> <p>MOTION BY: (Forman) <i>Approve the balance of the Purchase-of-Services Agreements. 9-0</i> MOTION 2ND BY: (Bottoni) AYES: Bottoni, Canter, Drake, Forman, Lavrenz, Neubauer, Perez, Ramey, and Ridley Meyers - 9 NOES: 0 ABSTENTIONS: 0</p>
<p>7. Finance Committee Fee-for-Service Contracts Recommendation.</p> <p>The Board was informed the Finance Committee unanimously agreed to recommend approval of the Fee-for-Service Agreements to the Board.</p> <p>Chairwoman Neubauer asked for a brief re-cap of the Jefferson County Human Services YCSF contract and asked what transpired in Milwaukee with that YCSF to end that service locally. It was asked for explanation of the reasoning for needing this option outside of Milwaukee County. It was explained that purchasing beds per-use instead of paying for the entire operation of the facility will off-set expenses and be a good alternative to residential placement.</p> <p>MOTION BY: (Lavrenz) <i>Approve Fee-for-Service Contracts. 9-0</i> MOTION 2ND BY: (Bottoni) AYES: Bottoni, Canter, Drake, Forman, Lavrenz, Neubauer, Perez, Ramey, and Ridley Meyers - 9 NOES: 0 ABSTENTIONS: 0</p>
<p>8. Finance Committee Employment Agreement Recommendation.</p> <p>The Board was informed the Finance Committee unanimously agreed to recommend approval of the Employment Agreement to the Board.</p>

SCHEDULED ITEMS (CONTINUED):

	<p>No questions were asked, and voting occurred.</p> <p>MOTION BY: (Lavrenz) <i>Approve the Employment Agreement Recommendation. 9-0</i></p> <p>MOTION 2ND BY: (Canter)</p> <p>AYES: Bottoni, Canter, Drake, Forman, Lavrenz, Neubauer, Perez, Ramey, and Ridley Meyers - 9</p> <p>NOES: 0</p> <p>ABSTENTIONS: 0</p>
9.	<p>Receipt of Revenue.</p> <p>The Board was informed the Finance Committee unanimously agreed to recommend approval of the Receipt of Revenue to the Board.</p> <p>No questions were asked, and voting occurred.</p> <p>MOTION BY: (Perez) <i>Approve the Receipt of Revenue. 9-0</i></p> <p>MOTION 2ND BY: (Drake)</p> <p>AYES: Bottoni, Canter, Drake, Forman, Lavrenz, Neubauer, Perez, Ramey, and Ridley Meyers - 9</p> <p>NOES: 0</p> <p>ABSTENTIONS: 0</p>
10.	<p>Governance Committee Update.</p> <p>Kate Flynn Post provided an update as Board Member Ginlack was excused from this meeting. She presented that the committee continues to work through the Board Survey results and have asked Committee members to bring their top five questions to the May 8, 2024, Governance Committee Meeting to further discuss.</p> <p>Having a virtual option for board meetings was also discussed in by the committee and with administrative support.</p> <p>This Item was Informational.</p>
11.	<p>Bylaws Update. (Board Member Ginlack/Action Item) (The Governance Committee, at its meeting on March 13, 2024, unanimously recommended approval of this Item.)</p> <p>Board Member Ginlack was excused from this meeting, therefore Research Analyst, Kate Flynn Post provided the update on this recommendation. There were three sections discussed in the Bylaws Update, but only two have been unanimously recommended for approval at this</p>

SCHEDULED ITEMS (CONTINUED):

	<p>time for board. The update in Article 3 and Article 7 are the only items up for vote and the update in Article 4 should be disregarded. No questions were raised by the board and voting occurred.</p> <p>MOTION BY: (Canter) Approve the Bylaws Updates in Article 3 and Article 7. 9-0 MOTION 2ND BY: (Ramey) AYES: Bottoni, Canter, Drake, Forman, Lavrenz, Neubauer, Perez, Ramey, and Ridley Meyers - 9 NOES: 0 ABSTENTIONS: 0</p>
12.	<p>Member Expectations Document Update.</p> <p>MOTION BY: (Forman) Approve the Member Expectations Document Recommendation under Section 2, Meetings/Events. 9-0 MOTION 2ND BY: (Ridley Meyers) AYES: Bottoni, Canter, Drake, Forman, Lavrenz, Neubauer, Perez, Ramey, and Ridley Meyers - 9 NOES: 0 ABSTENTIONS: 0</p> <p>This was a recommendation from the Governance Committee. There were two items that were updated and voted upon that addresses attendance at meetings.</p>
13.	<p>Mental Health Emergency Center Joint Venture Board Representative.</p> <p>MOTION BY: (Perez) Approve the representation of Chairwoman Neubauer to the Mental Health Emergency Center Joint Venture Board. 9-0 MOTION 2ND BY: (Bottoni) AYES: Bottoni, Canter, Drake, Forman, Lavrenz, Neubauer, Perez, Ramey, and Ridley Meyers - 9 NOES: 0 ABSTENTIONS: 0</p> <p>The agreement with Mental Health Emergency Center Joint Venture states that the Chairperson of the Mental Health Board should also be a representative on the Mental Health Emergency Center Joint Venture Board. This was discussed at the Governance Committee meeting and there were no objections to Chairwoman Neubauer filling this role. The Mental Health Board unanimously approved the representation by Chairwoman Neubauer to that Board.</p>
14.	<p>Chairwoman Nicholson address to the Mental Health Board.</p> <p>Chairwoman Nicholson was unable to attend this meeting due to a scheduling conflict.</p>

SCHEDULED ITEMS (CONTINUED):

	<p>MOTION BY: (Neubauer) <i>Approve this Item to be held over to a future meeting. 9-0</i></p> <p>MOTION 2ND BY: (Ridley Meyers)</p> <p>AYES: Bottoni, Canter, Drake, Forman, Lavrenz, Neubauer, Perez, Ramey, and Ridley Meyers - 9</p> <p>NOES: 0</p> <p>ABSTENTIONS: 0</p> <p>This Informational Item will be held over to a future meeting.</p>
15.	<p>Mental Health Board Presentation at the March 14, 2024, Mental Health Task Force Meeting.</p> <p>Chairwoman Neubauer presented the PowerPoint presentation to the Milwaukee County Mental Health Board that was previously presented at the Mental Health Task Force Meeting on March 14, 2024.</p> <p>This Item was Informational.</p>
16.	<p>Follow-Up Discussions from the March 21, 2024, Public Comment Budget Hearing.</p> <p>Chairwoman Neubauer asked the Board if anyone had any comments about the meeting and provided a brief recap of the minutes to refresh the Board members on discussions. An update about the Mental Health Liaison position was made and the Mental Health Liaison position was referenced. Representatives from Mental Health America and the newly hired Liaison attended the April 25th meeting and made an introduction to the Board.</p> <p>Board member Lehrmann added comments from the March 21st Public Comment that the public has frustration with Chapter 51 which the Board doesn't have control over and it is a struggle to hear those concerns and not have much authority to make change. He suggested working with the County Board of Supervisors to address issues that are beyond the Mental Health Board's authority.</p> <p>Board member Lavrenz added that it is a pleasure to attend public comment hearings to be able to hear directly about issues. She added that the last speaker mentioned inpatient bed concerns and that should be addressed to ensure there is enough access for meeting the community's needs.</p> <p>This Item was Informational.</p>
17.	<p>Mental Health Board Meet and Greet at the June 11, 2024, Public Comment Meeting.</p> <p>Chairwoman Neubauer provided notice to the Mental Health Board that the June 11, 2024, meeting will immediately follow the Mental Health Task Force Meeting and be a wonderful opportunity to meet and greet individuals involved in that group as well as the public who attends both meetings. Chairwoman Neubauer reviewed the timeline for those meetings and</p>

SCHEDULED ITEMS (CONTINUED):

	<p>asked the Board to attend both meetings if possible or arrive at 4pm to be available for a meet and greet between meetings if they can't make both. It was also asked of the Board to stay an hour after the meeting to allow for the community to meet and greet everyone.</p> <p>Vice Chair Eilers mentioned that a newsletter would be a good way to create a bridge with the County Board of Supervisors.</p> <p>This Item was Informational.</p>
18.	<p>\$1M Budget Investment in Housing First.</p> <p>The Housing First investment provides housing navigation for unhoused individuals and Chairwoman Neubauer encourages continued investment in this area. Additionally, Chairwoman Neubauer stated she doesn't want to just rubber stamp items and wants to ensure the Board understands what they are approving and have solid understanding.</p> <p>This Item was Informational.</p>
19.	<p>Administrator Report.</p> <p>BHS Administrator Lappen provided updates about the Mental Health Emergency Center (MHEC), but shared that in the future, MHEC may provide updates to the Mental Health Board in a more formal manner.</p> <p>Of note, Milwaukee Police Department has progressive protocol in regard to mental health treatment. If detainees say they need mental health help and ask to be taken to MHEC, Milwaukee PD will do that.</p> <p>Updates on Granite Hills admission data was presented and there have been challenges with Granite Hills being able to fill the 120 beds that were expected to be utilized, effort is being made to add 20 more adult beds in 2024. At first, turnover in staff was high which is common, but has since stabilized.</p> <p>Harm reduction and prevention efforts being made are garnering national recognition which is something to celebrate and continue. It was reported that the State has made available the combination fentanyl and xylazine test strips and we are trying to get them. The expectation is that with the combination test strips, utilization of them will increase.</p> <p>This Item was Informational.</p>
20.	<p>Mental Health Board Staff Update.</p> <p>Chairwoman Neubauer asked BHS Director, Mike Lappen to provide an update on the hiring of staff dedicated to MCMHB duties. Mike confirmed that recruitment continues and there have been interviews for both the Board Liaison and the Committee Coordinator roles. It is anticipated that hiring should occur in the next couple of weeks.</p>

SCHEDULED ITEMS (CONTINUED):

	<p>This Item was Informational.</p>
21.	<p>DHHS Annual Report.</p> <p>DHHS Director, Shakita LaGrant-McClain and DHHS Deputy Director, David Muhammad, presented on division highlights. That presentation is included with these minutes. Some highlights from the last year are that Child Support Services has been added to the DHHS umbrella. Child Support Services initiated the FIRE program which assists fathers in the removal of birthing debts. This allows the father to begin supporting the child instead of being so far in debt right off the bat.</p> <p>The 2025-2027 Strategic Plan is being worked on now and continues the No Wrong Door Initiative to improve the customer experience and work towards population health and system change.</p> <p>Aging/Disability/Veterans Service help our community age safely in their home. 543,001 meals were served.</p> <p>Housing First helped reduce homelessness significantly by serving 90-100 individuals.</p> <p>Children’s Long-Term Support (CLTS) increased 45% for youth aged 3 and up.</p> <p>Investments in Equity were made; Access Clinic North location opened, harm reduction vending machines were installed throughout the county, prevention opportunities were marketed, and affordable housing is being built, and that will continue.</p> <p>Construction on the new DHHS building has begun and the timeline to move to that location remains the projected date of June 2025.</p> <p>Children, Youth, and Family Services began the renovations to the Secure Residential Care Center for Youth (SRCCY)</p> <p>This Item was Informational.</p>
22.	<p>CARS Substance Use Disorder (SUD) Presentation.</p> <p>Susan Clark and Christine Schultz presented. Utilization data was shared for various parts of programming. Unique Clients served for the following areas of the program are: Detoxification: 1412 Access Points: 2253 Recovery Support Coordination: 1718 Bed-based Services: 964 Treatment: 409 Recovery Support Services (non-clinical): 33</p> <p>This Item was Informational.</p>

SCHEDULED ITEMS (CONTINUED):

23.	<p>Closed Session. Discussion as to investigation of Milwaukee County Behavioral Health Services financial expenditure.</p> <p>MOTION BY: (Ramey) <i>Approve the Discussion as to investigation of Milwaukee County Behavioral Health Services financial expenditure in Closed Session. 9-0</i></p> <p>MOTION 2ND BY: (Perez)</p> <p>AYES: Bottoni, Canter, Drake, Forman, Lavrenz, Neubauer, Perez, Ramey, and Ridley Meyers - 9</p> <p>NOES: 0</p> <p>ABSTENTIONS: 0</p> <p>The Milwaukee County Mental Health Board went into closed session to discuss the investigation of Milwaukee County Behavioral Health Services financial expenditure. The Board came out of closed session, and no action was taken.</p>
24.	<p>Re-convened Open Session.</p> <p>Quality Committee Update.</p> <p>MOTION BY: (Drake) <i>Approve the Resuming of the Milwaukee County Mental Health Board Meeting in Open Session (resumed 12:33pm). 9-0</i></p> <p>MOTION 2ND BY: (Perez)</p> <p>AYES: Bottoni, Canter, Drake, Forman, Lavrenz, Neubauer, Perez, Ramey, and Ridley Meyers - 9</p> <p>NOES: 0</p> <p>ABSTENTIONS: 0</p> <p>Secretary Drake provided an update from the Quality Committee meeting which included a notification that a quarter lag in reporting data was approved to allow all who provide data the opportunity to compile full quarters instead of partial which is burdensome and confusing.</p> <p>This Item was Informational.</p>
25.	<p>Finance Committee Update.</p> <p>Updates from Board Member Canter were given.</p> <p>The Finance Committee meeting on March 28, 2024, had 2023 statistics and financial performance.</p> <p>The Finance Committee meeting on April 25, 2024, had various agreements which have been heard and voted upon by the Board.</p> <p>This Item was Informational.</p>

SCHEDULED ITEMS (CONTINUED):

26. **Office of Strategy, Budget, and Performance Quarterly Update on the State of Milwaukee County's Interests and Matters Related to Behavioral Health Services.**

Joseph Lamers, Office of Strategy, Budget, and Performance was unable to attend the 02/22/2024 and 04/25/2024 meetings due to a scheduling conflict.

MOTION BY: (Neubauer) *Approve this Item to be held over to a future meeting. 9-0*

MOTION 2ND BY: (Bottoni)

AYES: Bottoni, Canter, Drake, Forman, Lavrenz, Neubauer, Perez, Ramey, and Ridley Meyers - 9

NOES: 0

ABSTENTIONS: 0

This Item was held over for a future meeting.

27. Adjournment.

MOTION BY: (Neubauer) *Adjourn the April 25, 2024, Milwaukee County Mental Health Board Meeting. 9-0*

MOTION 2ND BY: (Ridley Meyers)

AYES: Bottoni, Canter, Drake, Forman, Lavrenz, Neubauer, Perez, Ramey, and Ridley Meyers - 9

NOES: 0

ABSTENTIONS: 0

This meeting was recorded, however there were technical difficulties with the recordings, rendering the audio clips inaudible. The official copy of these minutes and subject reports of this meeting, are available on Milwaukee County's Legislative Information Center website, which can be accessed by clicking the link below.

Length of meeting: 9:03 a.m. to 12:36 p.m.

Adjourned,

Jennifer Miles

Jennifer Miles

Interim Board Liaison

Milwaukee County Mental Health Board

SCHEDULED ITEMS (CONTINUED):

The next meeting for the Milwaukee County Mental Health Board will be on Thursday, June 20, 2024, @ 9:00 a.m.

**To View All Associated Meeting Materials,
Visit the Milwaukee County Legislative Information Center at:
[Milwaukee County - Calendar \(legistar.com\)](https://legistar.com)**

**Visit the Milwaukee County Mental Health Board Web Page at:
<https://county.milwaukee.gov/EN/DHHS/About/Governance>**

The April 25, 2024, meeting minutes of the Milwaukee County Mental Health Board are hereby submitted for approval at the next scheduled regular meeting of the Milwaukee County Mental Health Board.



Shirley Drake, Secretary
Milwaukee County Mental Health Board

COUNTY OF MILWAUKEE
Behavioral Health Services Administration
Inter-Office Communication

DATE: May 28, 2024

TO: Mary Neubauer, Chairperson – Milwaukee County Mental Health Board

FROM: Shakita LaGrant-McClain, Director, Department of Health and Human Services
Approved by Michael Lappen, Administrator, Behavioral Health Services

SUBJECT: **Report from the Director, Department of Health and Human Services, Requesting Authorization to Execute 2024 Fee-for-Service Agreements**

Issue

Wisconsin Statute 51.41(10) requires approval for any contract related to mental health (substance use disorder) with a value of at least \$100,000. No contract or contract adjustment shall take effect until approved by the Milwaukee County Mental Health Board. Per the statute, the Director of the Department of Health and Human Services (DHHS) is requesting authorization for the BHS Children’s Community Mental Health Services & Wraparound Milwaukee, and the Community Access to Recovery Services (CARS) Networks to execute mental health and substance use contracts.

Background

Approval of the recommended contract allocations will allow BHS to provide a broad range of rehabilitation and support services to adults with mental health and/or substance use disorders and children with serious emotional disturbances.

2024 Contract for Adult Services

Kennedy’s Circle of Wellness - \$31,680*

CONTRACT AMENDMENT adding funds to 2024 - 2025 Fee For Service Agreement for Behavioral Health/Social Services. Vendor will provide Substance Use Disorder services to BHS CARS clients. The existing FFS contract with this vendor is for \$93,851.58 and this additional funding would bring the total contract amount to \$125,531.58.

House of Jacob LLC- \$200,000

CONTRACT AMENDMENT adding funds to 2024 - 2025 Fee For Service Agreement for Behavioral Health/Social Services. Vendor will provide Adult Family Home Services to BHS CARS clients. The existing FFS contract with this vendor is for \$90,000 and this additional funding would bring the total contract amount to \$290,000.

Brighter Dayz Treatment Center- \$270,000

CONTRACT AMENDMENT adding funds to 2024 - 2025 Fee For Service Agreement for Behavioral Health/Social Services. Vendor will provide Adult Family Home Services to BHS CARS clients. The existing FFS contract with this vendor is for \$147,996.57 and this additional funding would bring the total contract amount to \$417,996.57.

East Point Residential Facility, LLC- \$475,000

CONTRACT AMENDMENT adding funds to 2024 - 2025 Fee For Service Agreement for Behavioral Health/Social Services. Vendor will provide Adult Family Home Services to BHS CARS clients. The existing FFS contract with this vendor is for \$162,067.40 and this additional funding would bring the total contract amount to \$637,067.40.

2024 Contract for Childrens Services

Jewish Family Services, Inc. - \$200,000 (initial contract amount of \$105,000)

CONTRACT AMENDMENT adding funds to FFS contract effective dates 1/1/2024 to 12/31/2025. Vendor provides Comprehensive Community Services for Children. The existing contract amount is \$105,000 for a new total contract amount of \$200,000.

Fiscal Summary

The amount of spending requested in this report is summarized in the table below:

Vendor/Agency Name	Currently Approved Allocation	Contract Change Requested Amount	2023 Allocation	Proposed 2024 Allocation	2023/2024 Variance
Kennedy’s Circle of Wellness*	\$93,851.58	\$31,680.00	\$0.00	\$125,531.58	\$125,531.58
House of Jacob LLC	\$90,000.00	\$200,000.00	\$0.00	\$290,000.00	\$290,000.00
Brighter Dayz Treatment Center	\$147,996.57	\$270,000.00	\$0.00	\$417,996.57	\$417,996.57
East Point Residential Facility, LLC	\$162,067.40	\$475,000.00	\$0.00	\$637,067.40	\$637,067.40
Jewish Family Services, Inc.	\$105,000.00	\$200,000.00	\$0.00	\$305,000.00	\$305,000.00
Total	\$598,915.55	\$1,176,680	\$0	\$1,775,595.55	\$1,775,595.55

*Represents an agreement with at least partial grant funding.

Shakita LaGrant-McClain

Shakita LaGrant-McClain, Director
Department of Health and Human Services

Cc: Richard Canter, Finance Chairperson

COUNTY OF MILWAUKEE
Behavioral Health Services Administration
Inter-Office Communication

DATE: May 28, 2024

TO: Mary Neubauer, Chairperson – Milwaukee County Mental Health Board

FROM: Shakita LaGrant-McClain, Director, Department of Health and Human Services
Approved by Michael Lappen, Administrator, Behavioral Health Services

SUBJECT: **Report from the Director, Department of Health and Human Services, Requesting Authorization to Execute 2024 Purchase of Service Agreements**

Issue

Wisconsin Statute 51.41(10) requires approval for any contract related to mental health (substance use disorder) with a value of at least \$100,000. No contract or contract adjustment shall take effect until approved by the Milwaukee County Mental Health Board. Per the statute, the Director of the Department of Health and Human Services (DHHS) is requesting authorization for the BHS Children's Community Mental Health Services & Wraparound Milwaukee, and the Community Access to Recovery Services (CARS) Networks to execute mental health and substance use contracts.

Background

Approval of the recommended contract allocation will allow BHS to provide a broad range of rehabilitation and support services to adults with mental health and/or substance use disorders and children with serious emotional disturbances.

2024 Contract for Adult Services

Vivent Health, Inc. - \$85,246 *

At the April 27, 2023, meeting of the Milwaukee County Mental Health Board, the Board approved BHS to enter into a POS contract with Vivent Health, Inc. in the amount of \$124,597 for the Harm Reduction Vending Machine project, funded by Opioid Settlement Funds. At the August 24, 2023, MHB meeting the Board approved an amendment to the original contract for an additional \$114,393 bringing the contract total to \$238,990. This amendment was for additional harm reduction supplies and funded by State Opioid Response (SOR) and Substance Abuse Prevention and Treatment Block Grant (Supplemental). BHS will continue to contract with Vivent Health, Inc. to provide daily management of the Milwaukee County harm reduction vending machines, order all harm reduction supplies, and operate an Online Depot to Milwaukee County residents. BHS is requesting the Board to approve an additional \$85,246 of Opioid Settlement Funds to be added to this contract to bring the total 2024 contract to \$324,236.

Vin Baker Recovery LLC - \$500,000 *

At the December 14, 2023, meeting of the Milwaukee County Mental Health Board, the Board approved BHS to enter into a POS contract with Premier Care of Wisconsin, LLC, DBA Community Medical Services (CMS) in the amount of \$276,511 for Mobile Medication Assisted Treatment (MAT). Since approval by the board, CMS has not been able to receive approval from the State Opioid Treatment Authority (SOTA) and all requirements needed to begin mobile MAT services in Milwaukee County. Due to this, BHS ended the contract with CMS effective May 14, 2024. BHS will now use the remaining Congressional Directive on Spending (CDS) funds to contract with Vin Baker Recovery LLC for mobile MAT services to include the purchase of the mobile unit, IT equipment, medication pump, shore power, and sales tax to get the unit registered in the state of Wisconsin, resulting in a total contract for 2024 of \$500,000. Contract will be back dated to 6/1/2024 (6/1/2024-9/29/2024) as all CDS funds need to be spent by 9/29/2024. This request is for a single-sourced contract as the grant requirement to have all funds spent by 9/29/2024 makes it impractical to RFP for the service with the short amount of time remaining. Additionally, it should be noted that the only other known mobile MAT services in Milwaukee County is being completed by the Milwaukee County Office of Emergency Management (OEM), and BHS has also funded these MAT efforts in the amount of \$1,260,712 from 2023 to 2024 as approved by the MHB on December 14, 2023, with the same CDS funds.

La Causa, Inc. - \$ 350,000

BHS leadership is requesting a contract for La Causa, Inc. to resume providing crisis mobile services on third shift. La Causa provided these services for nine years from 2014 to 2023. During the COVID-19 pandemic these services were suspended to decrease the spread of and exposure to COVID-19 (majority of mobiles completed on third shift were in hospital emergency rooms). Resuming the services in late 2022 and 2023 was difficult due to workforce challenges and the contract was terminated at the request of La Causa. BHS let a request for proposal this year, and La Causa submitted a proposal to resume completing crisis mobile services on third shift (2400 to 0730). Due to this, La Causa has been selected for the contract. The requested funding will result in a contract in the amount of \$350,000 for 2024.

Vivent Health, Inc. - \$184,794 *

At the December 14, 2023, meeting of the Milwaukee County Mental Health Board, the Board approved BHS to enter into a POS contract with Vivent Health, Inc. in the amount of \$101,339 for harm reduction supplies, funded by the Congressionally Directed Spending - Mobile Medication Assisted Treatment grant. At the February 22, 2024, MHB meeting the Board approved an amendment to the original contract for an additional \$34,750 and at the April 25, 2024 MHB meeting the Board approved an amendment for an additional \$26,798 bringing the contract total to \$162,887. This amendment was for additional harm reduction supplies and funded by State Opioid Response (SOR) and TANF. BHS will continue to contract with Vivent Health, Inc. to provide harm reduction supply purchases. BHS is requesting the Board to approve an additional \$187,794 of Congressionally Directed Spending - Mobile Medication Assisted Treatment grant funds to be added to this contract to bring the total 2024 contract to \$350,681.

2024 Contract for Childrens Services

St. Charles Youth & Family Services - \$292,445

CONTRACT AMENDMENT: adding funds to 2022 POS contract (BHS-POS269-032022) effective dates 5/1/2024-12/31/2024.

Vendor to provide day to day oversight of Owen's Place (southside) while ensuring availability of resources and opportunities to support young adults transitioning to adulthood. These services should engage and empower young adults to actively plan for adulthood. Owens Place provides a welcoming environment which young adults will find inviting and therefore attend regularly. This work focuses on establishing strong positive relationships with young adults and facilitating their search for information that supports their transition including the critical domains of functioning: working, living, learning, belonging, healing, and safety. The existing St. Charles purchase of service contract is for \$426,779.99 and this additional funding would bring the total 2024 contract of \$719,224.99.

Wisconsin Community Services, Inc. - \$404,500

Wraparound Milwaukee-Childrens Community Mental Health will have a single source contract starting June 1, 2024 with Wisconsin Community Services (WCS) to pilot a placement coordination team. This team will work with Wraparound Milwaukee and Children, Youth, and Family Services (CYFS) to facilitate all aspects of services for youth in out of home care. These services include day to day monitoring, securing new placement options, crisis response and support and be the linkage from placement vendor to HSW. This pilot program is needed given the Wraparound Milwaukee HMO funding changes. Funding for this pilot is until 12/31/24 and CYFS will fund this beginning in January of 2025. Based off the lessons learned in this pilot a future RFP may occur in 2025.

Fiscal Summary

The amount of spending requested in this report is summarized in the table below:

Vendor/Agency Name	Currently Approved Allocation	Contract Change Requested Amount	2023 Allocation	Proposed 2024 Allocation	2023/2024 Variance
La Causa	\$0	\$350,000.00	\$0	\$350,000.00	\$350,000.00
Vivent Health Inc.*	\$238,990.00	\$85,246.00	\$238,990.00	\$324,236.00	\$85,246.00
Vivent Health Inc.*	\$162,887.00	\$187,794.00	\$0	\$350,681.00	\$350,681.00
Vin Baker Recovery, LLC*	\$0	\$500,000.00	\$0	\$500,000.00	\$500,000.00
St. Charles Youth and Family Services, Inc.*	\$426,779.99	\$292,445.00	\$426,779.99	\$719,224.99	\$292,445.00
Wisconsin Community Services, Inc.	\$0	\$404,500.00	\$0	\$404,500.00	\$404,500.00
Total	\$828,656.99	\$1,819,985.00	\$665,769.99	\$2,648,641.99	\$1,982,872.00

*Represents an agreement with at least partial grant funding.



Shakita LaGrant-McClain, Director
Department of Health and Human Services

Cc: Richard Canter, Finance Chairperson

COUNTY OF MILWAUKEE
Inter-Office Communication

Date: May 29, 2024

To: Mary Neubauer, Chairperson – Milwaukee County Mental Health Board

From: Shakita LaGrant-McClain, Director, Department of Health and Human Services

Subject: A report from the Director, Department of Health and Human Services, notifying the Milwaukee County Mental Health Board of a Prevention Services Purchase of Service Contract initiated with Safe and Sound, Inc, and subsequently terminated.

File Type: Informational Report

BACKGROUND

The annual Behavioral Health Services (BHS) budget process begins each spring with preparation of a proposed budget as part of the Milwaukee County Executives budget request to the Milwaukee County Behavioral Health Board and the County Board of Supervisors. In tandem with the budget process, DHHS Contract Administration began the planning and preparation for the BHS contracts related to the proposed budget for the 2024 fiscal year. In order to establish tentative contract amounts, Contract Administration obtained spending projections from BHS Fiscal for all current BHS service contracts to establish tentative budget allocations for 2024. The spending projections included a tentative 2024 Purchase of Service Contract budget allocation for Safe and Sound, Inc.

ISSUE

On 4/9/2024, BHS Milwaukee County Department of Health & Human Services (DHHS), Behavioral Health Services (BHS), CARS, entered into a 2024 Purchase of Service Contract with Safe and Sound, Inc. to provide Prevention Services, information, education, and training to individuals, their families, and the general public to increase awareness and reduce the stigma related to mental illness, substance abuse, and co-occurring disorders.

On 4/12/2024, Safe and Sound Executive Director, Bridget Robinson-Whitaker was notified by CARS Director, Jennifer Wittwer, that the contract was received as a result of a clerical error and that Safe & Sound would be receiving a contract cancellation notice early the following week. Also, on 4/12/2024, DHHS Contract Administration received an email from Ms. Robinson-Whitaker protesting the intended contract termination.

In October of 2023, while Prevention RFP proposals were still in the process of being scored, a request for authorization to execute a 2024 prevention contract with Safe and Sound, Inc. based upon the tentative 2024 budget allocations, went to the Milwaukee County MHB and was subsequently approved on 10/26/2023.

On 4/19/2024, the Milwaukee County Department of Health & Human Services (DHHS), Contract Administration, responded to Safe and Sound's 4/9/2024 grievance, upholding its decision to terminate the contract. The response said in part:

Although Safe and Sound was an incumbent contractor for Prevention Services, it did not apply for the BHS Prevention RFP which was published July 2023 and closed on September 8, 2023. As a result of the October 2023 MHB action, a 2024 Purchase of Service (POS) contract for prevention was mistakenly executed with Safe and Sound on 4/9/2024. Because Safe and Sound did not apply in response to the RFP solicitation, it was not recommended for an award, and BHS was unable to grant it a contract. This decision is consistent with standards and practices as identified in the BHS Purchasing and Procurement Policy: https://milwaukeecountydhhs.policystat.com/policy/token_access/cf39a52c-d4c5-45aa-92ce-61f269eaead4/.

Continued funding for DHHS programs is contingent upon the appropriation of sufficient funding in the budget process and continued availability of funds. As a result of the RFP process, funding was not budgeted for Safe and Sound, Inc.

The response went on to say:

Per Safe and Sound's 2024 Purchase of Service Contract, it is understood that the ability of Milwaukee County to contract for these services is dependent on appropriation of the necessary funds and receipt as provided for in the adopted budget. The County, therefore, reserves the unilateral right to terminate participation in such service upon ten (10) days written notice when it appears that the funds budgeted or provided through grants for such purpose will be exhausted or terminated. For the abovementioned reasons, BHS is giving thirty (30) days written notice of termination of Safe and Sound's 2024 POS Prevention Services contract, # BHS-POS356-042024, which will terminate on 5/19/2024.

In addition to BHS contract termination rights as cited above, BHS Legal and Contractual Remedies, §1-101, Authority to Resolve Protested Solicitations and Awards, does not provide appeal rights in response to a contract cancellation grievance.

RECOMMENDATION:

This report is for informational purposes only, and no action is required.

FISCAL EFFECT:

This report is informational and has no fiscal impact.

PREPARED BY:

Dennis Buesing, Contract Administrator, Department of Health and Human Services

APPROVED BY:

Shakita LaGrant-McClain

Shakita LaGrant-McClain, Director, Department of Health and Human Services

ATTACHMENTS:

None

cc: Richard Canter, Chairperson, Milwaukee County Mental Health Board Finance Committee

COUNTY OF MILWAUKEE
Behavioral Health Services Administration
Inter-Office Communication

DATE: May 28, 2024

TO: Mary Neubauer, MSW, CPS, Chairperson, Milwaukee County Mental Health Board

FROM: Michael Lappen, BHS Administrator
Submitted by John Schneider, MD, FAPA, BHS Chief Medical Officer

SUBJECT: **Report from Behavioral Health Services Administrator, Requesting Approval to Implement one new “Employment Agreement” As Established Under BHS Personnel Policy for Specific Classified, Unclassified and Exempt Physician, Psychologist and Advanced Practice Nurse County Employees**

Issue

Wisconsin Statute 51.41(10) requires approval for any contract related to mental health with a value of at least \$100,000. No such contract or contract amendment shall take effect until approved by the Milwaukee County Mental Health Board.

Per the above Statute, the BHS Administrator is requesting authorization to establish one (1) new Employment Agreement with a position for which we are currently recruiting.

Discussion

Due to the significant time, effort and expense associated with recruiting and retaining qualified medical staff, Behavioral Health Services, in collaboration with the Compensation Division and Corporation Counsel, has established a personnel policy that allows for employment agreements for specific classified, unclassified and exempt physician, psychologist and advanced practice nurse classifications within Milwaukee County employ. The purpose of these agreements is to stipulate total compensation including fringe benefits, recruitment/retention incentives and to establish a reasonable and fair “minimum resignation notice” requirement, which does not exist under Civil Service rules.

We submit the table below, which lists the personnel transaction that BHS will be requesting the Milwaukee County Chief Human Resources Officer to implement, in connection with Employment Agreement execution.

NEW AGREEMENT - RECRUITMENT									
ITEM ID	HIGH/ LOW ORG	NO. POSITIONS	RECOMMENDED		INFORMATIONAL: Market equitable alignment based on overall job duties/responsibilities, industry competition, competencies and education/experience requirements.	EFFECTIVE DATE (on or after)			
			PAY RANGE	ANNUAL PAY RATE					
EA2024-6A	6300/ 6405	1	P027	Min	197,891	X	Immediate Recruitment Need.	07/07/2024	
				Max	298,272	X			Retention
				Offer Not to Exceed \$285,800 *		X			Industry shortage / high competition for profession
									Other:
<p>The individual practitioner(s) entering into this agreement shall maintain current status as a benefit-eligible COUNTY EMPLOYEE, or if newly hired shall be established as a benefit-eligible COUNTY EMPLOYEE, including ERS or WRS enrollment, as applicable, and subject to all applicable Milwaukee County and BHS personnel policies and Civil Service rules, where applicable.</p> <p>Based on industry shortage and high competition, a recruitment/retention bonus may also be offered in some instances. All bonuses awarded shall be subject to conditions. Amount of bonus for above position(s), if determined to be eligible, shall not exceed \$25,000 annually.</p> <p>*The recommended and offered salary shall be equitable to what other BHS employees with similar post-graduate training experience are earning. If practitioner accepts part-time employment, recommended annual pay rate and bonus shall be pro-rated based on the assigned part-time FTE.</p> <p>In all cases, any funds identified through the Employment Agreement as a retention or other bonus shall not be considered eligible earnings under the Milwaukee County or State Pension Plans. Therefore, a retention or other bonus shall not affect in any manner any pension benefit under the Employee Retirement System (ERS) or Wisconsin Retirement System (WRS), including, but not limited to, earnable compensation, final average salary, service credit, eligibility for a benefit or timing of a benefit. Paid Extra Shifts may be authorized to salaried employees at Administration’s discretion when a critical patient care need exists.</p>									

Recommendation

It is recommended that the Milwaukee County Mental Health Board approve entering into an "Employment Agreement" (contract) with the candidate(s) selected for the vacant position(s) within the recommended total compensation amounts.

References

Wis. Stats. [46.19\(4\)](#): the salaries of any superintendent of a mental health institution and the salaries of any visiting physician and necessary additional officers and employees whose duties are related to mental health shall be fixed by the county executive.

Wis. Stats. [51.41\(10\)](#): MENTAL HEALTH CONTRACTS. Any contract related to mental health with a value of at least \$100,000, to which Milwaukee County is a party may take effect only if the Milwaukee County mental health board votes to approve, or does not vote to reject, the contract.

Wis. Stats. [51.42\(6m\)\(i\)](#): Establish salaries and personnel policies of the programs of the county department of community programs subject to approval of the county executive or county administrator and county board of supervisors, except in Milwaukee County, or the Milwaukee County mental health board in Milwaukee County unless the county board of supervisors or the Milwaukee County mental health board elects not to review the salaries and personnel policies.

Fiscal Effect

The recommended compensation contained in this report is supported by currently funded and authorized positions within Behavioral Health Services' 2024 operating budget. There is no tax levy associated with this request.

Respectfully Submitted,



Michael Lappen, Administrator
Behavioral Health Services

cc Richard Canter, JD, Chairperson, Milwaukee County Mental Health Board Finance Committee
Shakita LaGrant-McClain, Director, Department of Health and Human Services
John Schneider, MD, BHS Chief Medical Officer
Matthew Fortman, DHHS/BHS Fiscal Administrator
Pam Matthews, DHHS/BHS Sr. Budget Analyst
Lora Dooley, BHS Director of Medical Staff Services
Jennifer Miles, BHS Office Manager / Interim MHB Committee Coordinator

**AMENDMENT
2025 REQUESTED BUDGET
MILWAUKEE COUNTY
BEHAVIORAL HEALTH SERVICES**



MILWAUKEE COUNTY
DEPARTMENT OF HEALTH
& HUMAN SERVICES
**BEHAVIORAL
HEALTH SERVICES**

Submit completed amendment templates to Kathleen.FlynnPost@milwaukeecountywi.gov
Due by Monday, June 24th 2024

Amendment Title:

Sponsor(s):

Amend budget text as follows
(optional):

On
Page(s):

Amend budget appropriations as follows:

Description	Revenue	Expense	Tax Levy
	-	-	-
	-	-	-
	-	-	-
	-	-	-
Total	-	-	-

COUNTY OF MILWAUKEE
Inter-Office Communication

Date: April 22, 2024
To: Mary Neubauer, Board Chair, Milwaukee County Mental Health Board
From: Joe Lamers, Director, Office of Strategy, Budget and Performance
Subject: 2025 Operating Budget Planning
File Type: Informational Report

OVERVIEW

This report provides a preliminary overview of 2025 operating budget process. Included are an overview of the budget timeline, a projection of the 2025 operating budget and a summary of key issues that are being monitored as a part of budget preparation.

BUDGET PROCESS / TIMELINE

January to April – Budget Preparation Phase

- Comptroller completes Five-Year Financial Forecast
- SBP evaluates forecasted expenditure and revenue changes
- County Executive prepares budget strategy and levy targets in line with County strategic plan
- SBP prepares technical budget instructions and budget system for department users

April to July 15 – Requested Budget Phase

- Departments request expenditures, revenue, and positions that they find appropriate for 2025
- Departments complete Racial Equity Budget Tool
- Departments submit final requested budget which complies with the assigned levy target

July 15 to October 1 – County Executive Phase

- SBP and County Executive analyze department requests
- County Executive hosts listening sessions, budget town halls
- County Executive determines what items are included or not included in Recommended Budget
- SBP and County Executive provide narrative explanation of the budget and submit completed document to County Board by October 1.

October 1 to Mid-November – Finance Committee / County Board Phase

- Finance Committee holds budget hearings to review recommended budget
- Finance Committee reviews and approves budget amendments
- Finance Committee and County Board hold listening sessions and public hearings
- County Board votes on amendments and vetoes (if necessary) and adopts the final 2025 Budget

Jan 1, 2025 – Start of Fiscal Year

- 2025 Budget goes into effect

2025 BUDGET PROJECTIONS

In July 2024, Milwaukee County opted to enact a new 0.4% sales tax to cover costs related to the unfunded liability of the County's pension system. While this additional revenue helps improve the County's fiscal outlook, the County still operates with a structural deficit where expenditures increase at a higher rate than revenues. Due to this structural deficit, the Five-Year Financial Forecast prepared by the Office of the Comptroller has projected (in File 24-369) a 2025 Budget deficit of \$11.5 million and a five-year cumulative structural deficit of \$68.9 million by 2029.

SBP has made preliminary assumptions on expenditures and revenues in the 2025 budget that would change the annual projection from an \$11.5 million deficit to a \$1.5 million surplus. These assumptions include the removal of cost items that were designated as one-time expenditures in the 2024 Adopted Budget, as well as an increase in the sales tax projection related State Assembly Bill 438/439. While these assumptions provide a potential path to a balanced budget, there is limited new funding anticipated to be available within the budget. Based on this financial outlook, the County Executive will issue flat tax levy targets to each department. Departments must absorb inflationary and cost-to-continue expenditure increases within their 2025 budget requests.

2025 Fiscal Forecast: Deficit/(Surplus) \$ in Millions			
Expenditure Type	Comptroller Forecast	SBP 2025 Budget Assumptions	Net Total
Levy-funded Capital	\$ (26.4)		\$ (26.4)
Other Uses (Wauwatosa Fire Charge)	\$ (4.0)		\$ (4.0)
Cost to Continue	\$ 0.2		\$ 0.2
Transit	\$ 2.1		\$ 2.1
Debt Service	\$ 5.0		\$ 5.0
Pension	\$ 10.4		\$ 10.4
Salaries & Overtime	\$ 11.5		\$ 11.5
Health & Other Benefits	\$ 12.1		\$ 12.1
One Time Operating Expenses		\$ (10.5)	\$ (10.5)
Expenditure Change	\$ 10.9	\$ (10.5)	\$ 0.4
Revenue Type			
One-time Revenue	\$ 11.8		\$ 11.8
State & Federal Revenues	\$ 3.4		\$ 3.4
Investment Earnings	\$ 1.6		\$ 1.6
Odd Year Unclaimed Funds	\$ (1.2)		\$ (1.2)
Property Taxes	\$ (1.5)		\$ (1.5)
Transit Revenue	\$ (2.0)		\$ (2.0)
Sales Tax	\$ (2.4)	\$ (2.5)	\$ (4.9)
Miscellaneous Revenue	\$ (8.9)		\$ (8.9)
Revenue Change	\$ 0.7	\$ (2.5)	\$ (1.8)
Projected 2025 Operating Gap/(Surplus)	\$ 11.5	\$ (13.0)	\$ (1.5)

KEY ISSUES IN THE 2025 BUDGET

Levy-Funded Capital: The 2024 budget included \$26.4 million in tax levy funded capital project spending (as opposed to bond funding). The five-year forecast projects these expenditures as “one-time” and does include any tax levy funding for capital projections. This assumption may be revisited during the budget process based on the recommendations of the Capital Improvement Committee

Wauwatosa Fire Charge: Milwaukee County previously had a liability for fire protection charges at the County grounds in Wauwatosa. The 2024 budget included additional funding to retire the liability and a reduction in costs of \$4 million is projected in 2025.

Transit: The 2024 budget included a significant ongoing levy increase toward transit to avoid service reductions. A combination of this tax levy increase and federal funding

means that no major changes are expected in the 2025 transit budget. However, when federal funding expires in 2027 a significant gap in the transit budget is expected.

Pension: Employees who join the county after December 31, 2024 will become members of the Wisconsin Retirement System (WRS) instead of the Milwaukee County Employees Retirement System (ERS). Additionally, there are cost increases projected to the ERS normal cost and unfunded liability payments based on the calculations of the pension fund's actuary. Pension Obligation Bond (POB) payments will increase by \$10.6 million in 2025 as part of the debt service schedule from the Office of the Comptroller. Per 2023 Act 12, the 0.4% sales tax can be used to cover cost increases for POBs, ERS unfunded liability, and ERS normal costs. Costs related to WRS contributions are not eligible for the 0.4% sales tax and are funded by tax levy.

Compensation: The 2025 budget projection assumes a 2% general increase and some general compensation funding based on the ongoing Compensation Transformation Projection. Additionally, SBP and the Office of the Comptroller are monitoring the countywide vacancy rate. In January 2023, the County had 3200 filled positions. In April 2024, that number has increased to 3500. While many of the new hires are Corrections Officers (who have seen significant recent pay increases), most departments have seen improvements in the ability to recruit and retain employees. This trend positively impacts the ability of departments to provide services. However, when the number of filled positions increases, there are increases in salaries, social security, overtime, health care, and other costs that based on the number of active employees. Departments will need to closely evaluate personnel spending within their 2025 Budget requests.

Health Benefits: Costs are projected to increase \$12.1 for health and other benefits due both to increasing utilization (due to additional FTEs participating in the health plan) and inflationary increases such as a 10% increase in pharmacy costs.

One-Time Operating Expenses: Like the levy-funded capital, the 2024 budget included approximately \$10.5 million of one-time expenditure items that are not expected to be included in the 2025 budget. This includes a one-time tax levy allocation for affordable housing, one-time investments in parks amenities and minor capital, and other one-time investments across multiple departments. These one-time investments were strategically included in the 2024 budget with the understanding that the County would continue to face structural deficit challenges in 2025 and future years. These one-time cost items are being removed from tax levy targets being issued to departments.

One-Time Operating Revenue: The 2024 Budget included \$11.8 million in one-time revenues from the debt service reserve. At this point, the 2025 Budget projections do not include a withdrawal from the reserve which is a revenue decrease of \$11.8 million.

Sales Tax: The Comptroller's Five-Year Forecast included \$2.4 million of projected sales tax growth in 2024. In addition, SBP is currently assuming that \$2.5 million of the 0.4% sales tax will be utilized to pay for Employees Retirement System (ERS) normal costs, which would provide an offset to the structural deficit in 2025. The 0.4% sales tax

must be used to pay for the unfunded liability within ERS. After the required annual payment to the unfunded liability is made, any remaining funds from the 0.4% sales tax must be used for additional payments to the unfunded liability, payments to the Pension Obligation Bond, or payments to ERS normal costs. The amount directed to each category is to be determined in the annual budget process.

ALIGNMENT TO STRATEGIC PLAN

3B: Enhance the County's fiscal health and sustainability

FISCAL EFFECT

The report is informational only and there is no fiscal impact.

PREPARED BY:

Daniel Laurila, Operating Budget Director, SBP

APPROVED BY:

Joe Lamers, Director, SBP

Chairperson: Ken Ginlack
Research Analyst: Kate Flynn Post, (414) 391-7845
Interim Committee Coordinator: Jennifer Miles, (414) 257-7639

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**MILWAUKEE COUNTY MENTAL HEALTH BOARD
GOVERNANCE COMMITTEE**

Wednesday, May 8, 2024 – 1:30 P.M.
Microsoft Teams Meeting

MINUTES

PRESENT: Ken Ginlack, Kathy Bottoni, Mary Neubauer

EXCUSED: Rachel Forman*

Additional Board Members Present: Dennise Lavrenz

SCHEDULED ITEMS:

NOTE: All Informational Items are Informational Only Unless Otherwise Directed by the Committee.

1. **Welcome**

Chairman Ginlack welcomed everyone to the May 8, 2024, Mental Health Board Governance Committee's remote/virtual meeting.

2. **Minutes from the March 13, 2024, Committee Meeting**

The minutes were reviewed, acknowledged, and accepted by the Committee.

This Item was informational.

3. **Board Survey Results Follow-Up Discussion from the January 10, 2024, Committee Meeting**

Additional questions to address were discussed. It was noted that questions 4,9,13,14, and 17 have been previously discussed by the Governance Committee.

#4: Reallocation of funds

#9: Importance of institutional services

#13: Early Intervention

#14: Diversion from criminal justice system

#17: Cost savings

Kathy Bottoni brought item 16 of the Board Survey as an item to discuss further.

#16: Milwaukee County provides the right amount of crisis intervention training to community providers and law enforcement.

SCHEDULED ITEMS (CONTINUED):

	<p>Discussion ensued about knowledge that training has occurred, but unsure if ongoing training is happening and how often it is commenced and by whom. Committee Member, Mary Neubauer, discussed historical knowledge of training efforts and Chairman Ginlack and Committee Member Kathy Bottoni also offered their recollections of training and the need for clarity on continued efforts within the community. Later in the discussion, BHS Deputy Director, Amy Lorenz, confirmed to the committee that Crisis Intervention Training and ASIST (suicide crisis) training is offered internally to staff and the provider network, but not to the community. Instead, referrals to partners like Mental Health America (MHA), and National Alliance on Mental Illness (NAMI) are provided. Additionally, funds are funneled to community resources to offer training to the community.</p> <p>Dr. Schneider added that there is some community training in the very early development stages with BHS and more can be shared as it is known in the future. The goal to offer community training is fall of 2024. A more formal presentation of trainings to the full board was discussed for the future.</p> <p>The next topics for discussion were items 27 and 28 of the survey due to their similarity.</p> <p>#27: The MCMHB has a partnership relationship with the Milwaukee County Executive administration in the delivery of mental health functions, programs, and services in Milwaukee County.</p> <p>#28: The MCMHB has a productive relationship with the Milwaukee County Board of Supervisors in the administration of mental health functions, programs, and services in Milwaukee County.</p> <p>Comments were made about outreach attempts by various Mental Health Board members to both the County Executive and County Board. Both the County Executive and County Board will be invited to the June 11, 2024, Budget Public Hearing. The County Executive is unable to attend the June 11, 2024, meeting, but will continue to be invited to future meetings. The consensus of the Governance Committee is that relationship building with both the Milwaukee County Executive and the Milwaukee County Board of Supervisors should occur and intentional efforts to begin that build are needed. Ideas and action steps on how to begin building those partnerships are setting up a meeting with those parties to ask their view on partnership and ensure it aligns with the Mental Health Board's view on partnership. Once that alignment is established, then consistently inviting the County Executive and the County Board to meetings and events will be a way to be inclusive. Documenting invitations to track outreach efforts will be done as well to help support future discussions with partners.</p> <p>*Committee Member Rachel Forman was having difficulty connecting to the meeting; however, she sent Chairman Ginlack her list of survey questions which will be discussed in a future meeting to allow for her comments to be heard.</p> <p>This Item was Informational.</p>
4.	Membership Update

SCHEDULED ITEMS (CONTINUED):

	<p>Dr. Ramel Smith (to the Psychiatrist/Psychologist Member role) and Dr. Lynette Studer (non-voting UW-Madison Health Care Provider Member role) have been appointed by the County Executive to join the Mental Health Board. They will be attending their first meeting in June 2024.</p> <p>This Item was Informational.</p>
5.	<p>Office of Corporation Counsel Legal Support</p> <p>Attorney Karen Tidwell from Office of Corporation Counsel (OCC) attended the April 25, 2024, Mental Health Board meeting and was present at the Governance Committee meeting. As a representative from Corporation Counsel, Karen Tidwell will offer support to the board with such things as reviewing meeting agendas and legal questions at least a week in advance to allow for time to research and provide a response. Requests for attorney presence at future meetings should be sent to the Office of Corporation Counsel with as much notice as possible and should be directed to Attorney Scott Brown and Attorney Karen Tidwell. There are several new member orientation training components that will require input from OCC and will be addressed in the near future.</p> <p>This Item was Informational.</p>
6.	<p>Adjournment</p> <p>Chairman Ginlack ordered the meeting adjourned.</p>
<p>This meeting was recorded. The official copy of these minutes and subject reports, along with the audio recording of this meeting, is available on the Milwaukee County Legislative Information Center. Length of meeting: 1:39 p.m. to 2:38 p.m.</p> <p>Adjourned,</p> <p><i>Jennifer Miles</i></p> <p>Jennifer Miles Interim Committee Coordinator Milwaukee County Mental Health Board</p> <p>The next meeting of the Milwaukee County Mental Health Board Governance Committee will be on July 10, 2024 To View All Associated Meeting Materials, Visit the Milwaukee County Legislative Information Center at: Milwaukee County - Calendar (legistar.com)</p> <p>Visit the Milwaukee County Mental Health Board Web Page at: https://county.milwaukee.gov/EN/DHHS/About/Governance</p>	

Survey Overview:

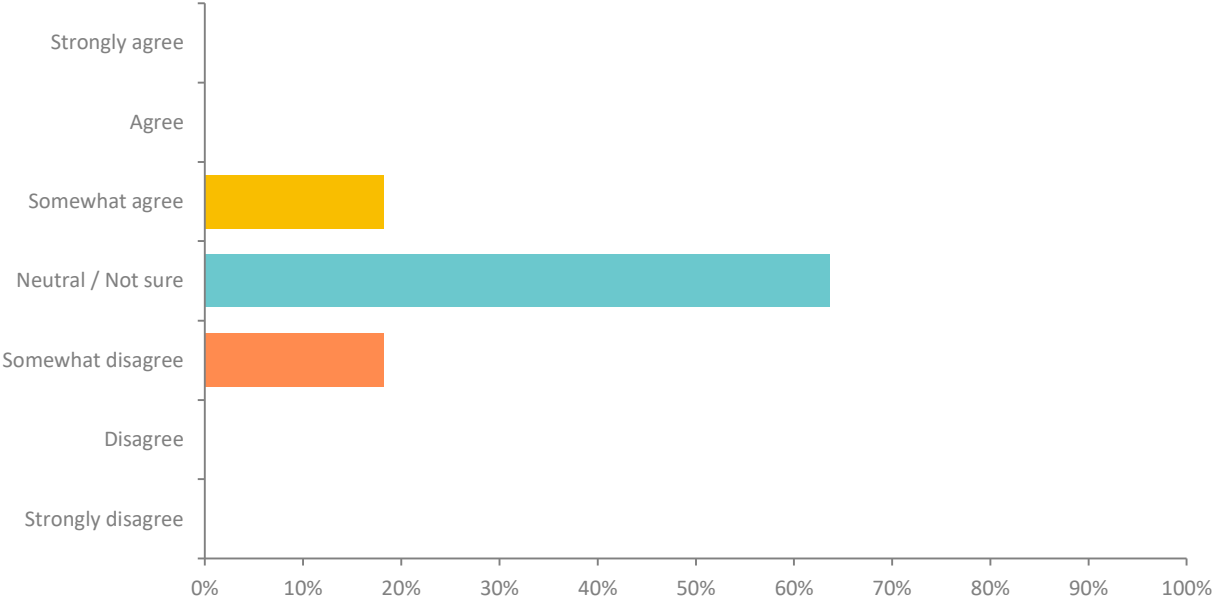
- 35 Likert-Scale Questions with Optional Comments + 1 Open-ended Question.
- Highlighted questions received the broadest range of responses.

Q1: The MCMHB has control over the approval of contracts to support Mental Health Services in Milwaukee County.	Q10: The MCMHB has reduced reliance on the use of institutional services.
Q2: The MCMHB has control over the quality of mental health services provided by Milwaukee County.	Q11: The MCMHB protects the personal liberty of individuals experiencing mental illness in Milwaukee County.
Q3: The MCMHB exercises oversight over the administration of mental health programs provided by Milwaukee County.	Q12: Individuals who experience mental illness in Milwaukee County are treated in the least restrictive environment.
Q4: The MCMHB is able to re-allocate funds as needed between mental health functions, programs, and services within the approved mental health budget.	Q13: Milwaukee County programs provide early intervention to prevent the experience of more serious and prolonged episodes.
Q5: The MCMHB decides mental health policy for Milwaukee County.	Q14: Milwaukee County programs divert individuals experiencing mental illness from the criminal justice system.
Q6: Mental health services in Milwaukee County are delivered in an efficient and effective manner.	Q15: Milwaukee County has the right number of mobile crisis units for the community.
Q7: Milwaukee County is committed to community-based, person-centered, and recovery-oriented mental health programs.	Q16: Milwaukee County provides the right amount of crisis intervention training to community providers and law enforcement.
Q8: Milwaukee County promotes comprehensive community-based services over the use of institutional services.	Q17: The MCMHB has achieved cost savings in the provision of mental health services in Milwaukee County.
Q9: Institutional services remain an important part of the MCMHB's comprehensive mental health program design in Milwaukee County.	Q18: The MCMHB has found alternative funding for many of its mental health programs providing relief to Milwaukee County funding.

Q19: Milwaukee County influences the policies and practices of private inpatient facilities available to county residents.	Q28: The MCMHB has a productive relationship with the Milwaukee County Board of Supervisors in the administration of mental health functions, programs, and services in Milwaukee County.
Q20: Milwaukee County provides individuals with inpatient services whenever needed.	Q29: The MCMHB has a productive relationship with the Milwaukee County Combined Community Services Board in the administration of mental health functions, programs, and services in Milwaukee County.
Q21: Milwaukee County provides individuals with immediate emergency services whenever needed.	Q30: The Milwaukee County executive administration is receptive of recommendations by the MCMHB for mental health functions, programs, and services in Milwaukee County.
Q22: The MCMHB is fulfilling its responsibility for the well-being, treatment and care of the mentally ill, alcoholic and other drug dependent citizens residing within Milwaukee County.	Q31: MCMHB recommendations regarding the mental health budget, the community aids, and the tax levy amounts are considered by the Milwaukee County executive administration.
Q23: The MCMHB engages community representatives in its deliberative processes.	Q32: The MCMHB receives all of the information requested to fulfill its duties of overseeing mental health functions, programs, and services in Milwaukee County.
Q24: The MCMHB is supported by Milwaukee County executive administration.	Q33: The MCMHB meets frequently enough to fulfill its responsibilities.
Q25: The MCMHB is supported by Milwaukee County BHS administrative staff.	Q34: The MCMHB is well organized in its committee and subcommittee structures.
Q26: The MCMHB exercises oversight of Milwaukee County administrative staff responsible for Milwaukee County behavioral health programs.	Q35: The MCMHB Bylaws have no immediate need for updating.
Q27: The MCMHB has a partnership relationship with the Milwaukee County executive administration in the delivery of mental health functions, programs, and services in Milwaukee County.	Q36: Do you have any additional comments about the MCMHB role and functions for follow-up by the Governance Committee?

Q16: Milwaukee County provides the right amount of crisis intervention training to community providers and law enforcement.

Answered: 11 Skipped: 0



Q16: Milwaukee County provides the right amount of crisis intervention training to community providers and law enforcement.

Answered: 11 Skipped: 0

ANSWER CHOICES	RESPONSES	
Strongly agree	0%	0
Agree	0%	0
Somewhat agree	18.18%	2
Neutral / Not sure	63.64%	7
Somewhat disagree	18.18%	2
Disagree	0%	0
Strongly disagree	0%	0
TOTAL		11

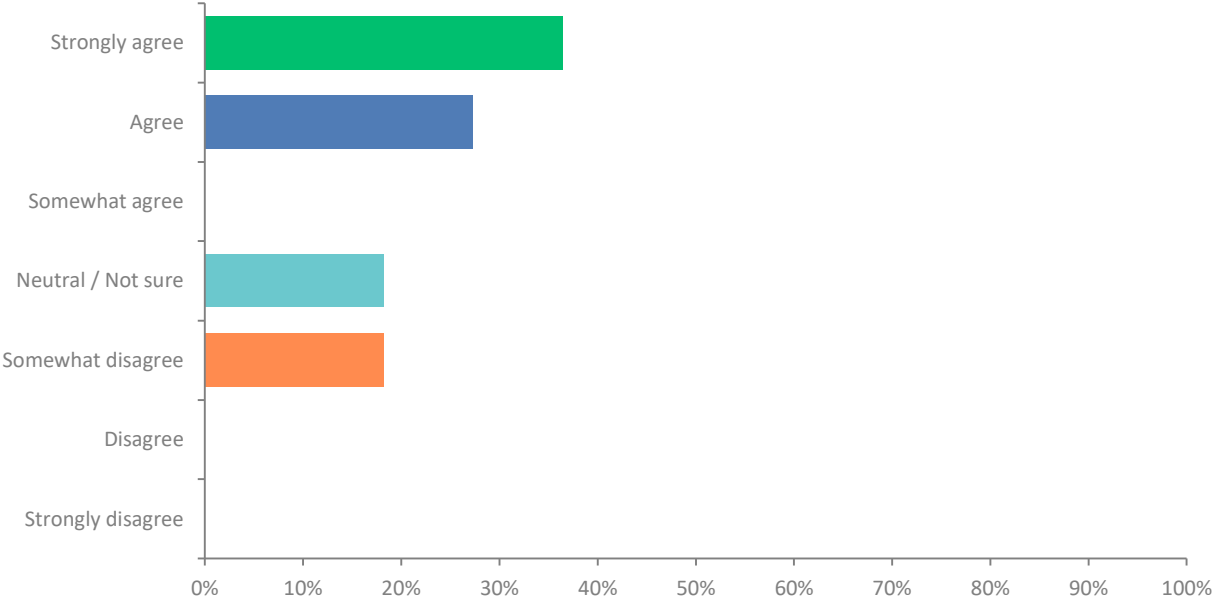
Q16: Milwaukee County provides the right amount of crisis intervention training to community providers and law enforcement.

Comments: 2

- The training that is given in the academy is basic and inadequate and there is not advanced training or continuing training after they come out of the academy. There should be a specialized team for crisis intervention trained officers. Also, the Miracle Team has not been tapped into and only NAMI has been utilized.
- I know such training exists but am out of touch with how much and its true impact.

Q27: The MCMHB has a partnership relationship with the Milwaukee County executive administration in the delivery of mental health functions, programs, and services in Milwaukee County.

Answered: 11 Skipped: 0



Q27: The MCMHB has a partnership relationship with the Milwaukee County executive administration in the delivery of mental health functions, programs, and services in Milwaukee County.

Answered: 11 Skipped: 0

ANSWER CHOICES	RESPONSES	
Strongly agree	36.36%	4
Agree	27.27%	3
Somewhat agree	0%	0
Neutral / Not sure	18.18%	2
Somewhat disagree	18.18%	2
Disagree	0%	0
Strongly disagree	0%	0
TOTAL		11

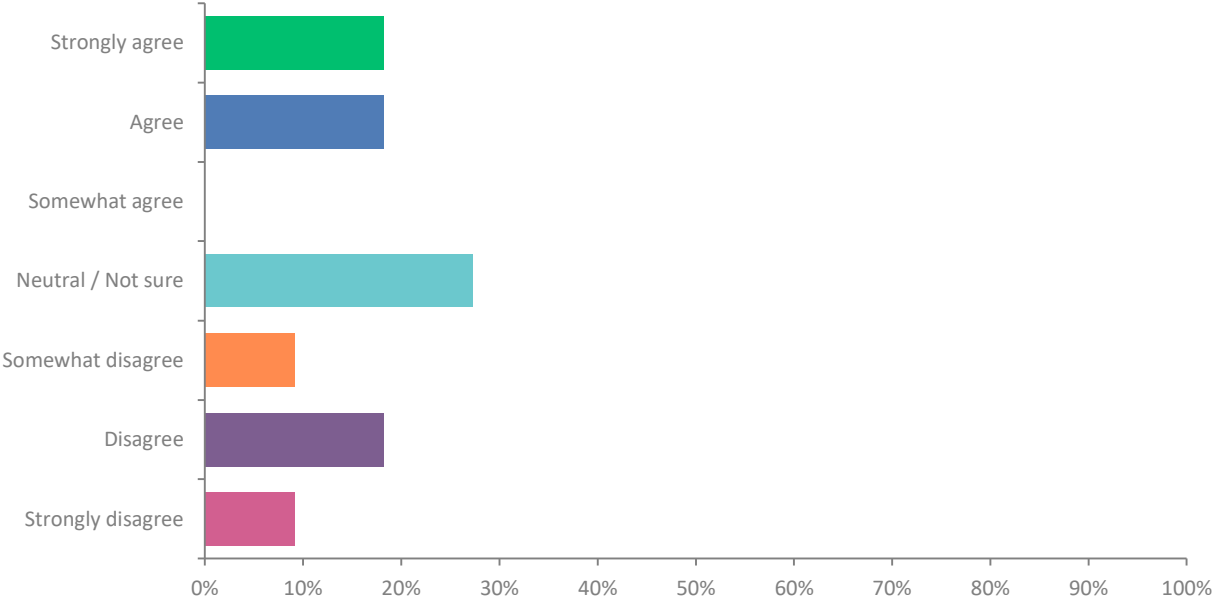
Q27: The MCMHB has a partnership relationship with the Milwaukee County executive administration in the delivery of mental health functions, programs, and services in Milwaukee County.

Comments: 3

- I don't think that the administration is always straight and having the been interests of the MHB in mind. That is exhibited by the cost-of-living wage issue and how that was handled. We are not treated professionally at an equal level by executive administrative staff regardless as to whether we are elected or not, we manage \$260M budget for mental health programs and services for MKE County and have not been given the same respect. Certain Mental Health Board members have pressed the County Executive's Office to include Mental Health Board members at events sponsored by the County Executive or otherwise.
- Trending in the right direction, with residue of mistrust and feeling micromanaged from time to time. time to time.
- I don't experience this as a "partnership" relationship. I would imagine that some MCMHB members do.

Q28: The MCMHB has a productive relationship with the Milwaukee County Board of Supervisors in the administration of mental health functions, programs, and services in Milwaukee County.

Answered: 11 Skipped: 0



Q28: The MCMHB has a productive relationship with the Milwaukee County Board of Supervisors in the administration of mental health functions, programs, and services in Milwaukee County.

Answered: 11 Skipped: 0

ANSWER CHOICES	RESPONSES	
Strongly agree	18.18%	2
Agree	18.18%	2
Somewhat agree	0%	0
Neutral / Not sure	27.27%	3
Somewhat disagree	9.09%	1
Disagree	18.18%	2
Strongly disagree	9.09%	1
TOTAL		11

Q28: The MCMHB has a productive relationship with the Milwaukee County Board of Supervisors in the administration of mental health functions, programs, and services in Milwaukee County.

Comments: 4

- The MHB at this time has no relationship with the Milwaukee County Board of Supervisors.
- I have not found the MCBOS particularly supportive. I perceive that collaboration is done begrudgingly.
- I assume so. We have come a long way since the days when mental health policy was managed by a county supervisor!
- The relationship was antagonistic when the MHB was created, and I feel is no longer antagonistic, but we are totally separate silos. I think there is opportunity here.

Chairperson: Mary Neubauer (for Shirley Drake)
Research Analyst: Kate Flynn Post, (414) 391-7845
Interim Committee Coordinator: Jennifer Miles, (414) 257-7639

13

**MILWAUKEE COUNTY MENTAL HEALTH BOARD
QUALITY COMMITTEE**

Monday, June 3, 2024 - 10:00 A.M.
Microsoft Teams Meeting

MINUTES

PRESENT: Kenneth Ginlack, Dennise Lavrenz, Mary Neubauer

EXCUSED: Shirley Drake, Rachel Forman

SCHEDULED ITEMS:

NOTE: All Informational Items are Informational Only Unless Otherwise Directed by the Committee.

1. Welcome.

Chairwoman Neubauer welcomed everyone to the Milwaukee County Mental Health Board Quality Committee's June 3, 2024, remote/virtual meeting.

2. Minutes from the March 4, 2024, Committee meeting.

The minutes from the March 4, 2024, meeting reviewed, acknowledged, and accepted by the Committee.

This Item was Informational.

3. Quarter Lag in Reporting.

A reminder that there will be no quarterly reporting at this meeting due to the year-end data being presented in March and Q1 2024 data not yet being fully available. The Quality Meeting in September 2024 will have that data reported.

This Item was Informational.

4. Policy and Procedure Quarterly Report.

426 policies that were within the scheduled period meeting that were up to date.
27 that were overdue by one year; 4 that were overdue between one and three years; Zero for the three to five years; and Zero for the five to ten years.

SCHEDULED ITEMS (CONTINUED):

	<p>There are several overdue policies that are hospital related policies that we either need to retire or update. The plan is to meet with folks individually to take care of these once and for all. We don't want to blanket-retire them since they may apply to current crisis services, so reviewing/updating is the better option.</p> <p>This Item was Informational.</p>
5.	<p>Review of 2023 Admission Data Behavioral Health Services.</p> <p>Dr. John Schneider presented admission data for 2023. He reviewed trends from 2010-2023. Granite Hills took almost half of all patients from Mental Health Emergency Center (MHEC). For state institute cases, there were 118 Winnebago adult admissions. They had an average length of stay of about 25 days, with a range of 1 to 166 days.</p> <p>Deep dive into the data was presented for various aspects of admissions with children and youth admission data presented separately.</p> <p>There were cases where the patient was refused by all local hospitals, either based out of equity or based on their not being any beds in the Milwaukee region. When we look at the length of stay, they have a length of stay of about 27 days. These are sicker than average patients, the BHS inpatient length of stay when we closed was around 14 to 16 days.</p> <p>The Committee all voiced appreciation of the data and look forward to having it shared more broadly with the public.</p> <p>This Item was Informational.</p>
6.	<p>Client Rights Presentation.</p> <p>Client Rights Specialists help clients resolve the concerns about services they receive from a program or the provider. They review grievances and make recommendations for resolution and advocate and educate on client rights issues and compliance across BHS. They prevent some lawsuits and prevent ethics complaints filed by clients who allege that mental health professionals have violated their rights. They standardize care across healthcare fields and enable clients to have uniform expectations during their treatment. The BHS Client Rights team created a spreadsheet so that they know how to connect people with the proper Client Rights Specialist. They also created a process for partnering on investigations. The largest number of grievances are regarding dignity and respect.</p> <p>38% of our callers are complaining that they are not being treated with dignity and respect. 26% are due to service issues. 10% record privacy. 10% due to communication and discharge planning 16% other miscellaneous issues</p>

SCHEDULED ITEMS (CONTINUED):

<p>Some improvement goals for the area are: Goal #1 improve our client experience. Goal #2 coordinate our processes across DHS Goal #3 continue to enhance provider education and communication.</p> <p>As of June 1, 2024 Client Rights is rolling out a new documentation tracking system, which will quantify work being done in real time and allow reporting more regularly without detracting from the work that needs to be done. They inherited a very burdensome process and are now modernizing this legacy system to be able to get real time data tracking.</p> <p>Questions and comments followed.</p> <p>This Item was Informational.</p>
<p>7. PPS Non-Episodic Implementation Status Update.</p> <p>A new form and the new process for collecting data has been developed over the past couple of years. Where it originally came from was this desire to reduce data collection burden because moving from an episodic process to a non-episodic means that rather than collecting forms on specific episodes (people could be involved in multiple episodes at once or transitioned from one episode to another), we're tracking a person over the course of their enrollments and really follow the person rather than the episode of the program. That allows us to reduce some of the redundant data collection.</p> <p>There were three main benefits that we hoped we would derive out of this effort.</p> <p>#1 collecting social determinants of health data on all clients that we serve. If we're looking to see where we need to expand our services or enhance our services, this data is valuable for that purpose.</p> <p>#2 beyond the point of time prevalence estimate that we're looking at in some of the analytic work we can do with that and some of the other service and referral work we can do, we believe we can use the social determinants of health to track changes over time. We can see if their needs improved, remained the same, or got worse.</p> <p>#3 implementation moves beyond using the social determinants of health questions and outcomes and really focuses on the nuts and bolts of data collection because when we started this project, we were really trying to reduce the number of PPS forms that are providers and clients had to complete. When we quantified what this was, it was a reduction of nearly 20,000 assessments over the course of a year and if we quantify some of these savings, its remarkable. If we take that number of assessments that we reduced and we assign a value of about 3 minutes per assessment, some are longer, some are shorter, we're talking about anywhere from 50,000-60,000 minutes saved per year. That translates to nearly 1000 hours of less administrative time, close to 19 hours per week that were saved, which could be used for other services to serve more clients and about a 45% reduction in the total number of assessments that needed to be completed.</p> <p>This Item was Informational.</p>

SCHEDULED ITEMS (CONTINUED):

8.	<p>No Train No Gain NIATx Presentation.</p> <p>with this information that we collected, these are the steps that we took to improve our onboarding and training program. We created a training program in three formats to meet the staff needs and written oral and visual. We created welcome videos to get to know the leadership team UMM we created a universal welcome packet, including get to know Your Peers section and all of our policies and procedures at universal Training checklist for the leaders and new hires, a support of onboarding workflow one on one trainings and a mentorship program.</p> <p>Board member Ginlack added that we often hear about worker shortages and we know that people leave agencies due to not feeling supported and it's great to see that captured on the front end with steps to retain staff.</p> <p>This Item was Informational.</p>
9.	<p>NIATx MMC Referrals Presentation.</p> <p>Hannah Lang and Michele LeCloux presented on mobile crisis and that they're a team of 27 with counselors and social workers, interns, post docs and one psychologist. The crisis phone number is 414-257-7222 and is available 24/7. It's initially answered by impact, but any calls related to mental health, substance use, behavioral health, are forwarded through to mobile crisis clinicians. The second core part of the work done is mobile work which is Community mobiles where the team responds in pairs of two and those can be calls from individuals, schools, families, professionals, law enforcement and more. First, assessments are either on the phone or in person. Then they intervene or stabilize and link to services in the Community, including case management, peer support, etc. The following day or a few days later, a follow up over the phone and or in person and offer harm reduction tools such as gun locks, Narcan, etc. The aim of the NIATx project was to increase community presence. What we've learned so far is that the referral sources might give us a whole lot of referrals like Molina or like the bus ads, they're not going to give us a whole lot of referrals, but they're definitely an important referral source.</p> <p>Questions and comments ensued.</p> <p>This Item was Informational.</p>
10.	<p>Community Contract Vendor Quality Updates: Sanctions, Holds, and Service Suspensions.</p> <p>a) Broadstep Belwood: There was a formal notice sent to the agency on April 17th, 2024, suspending all client referrals until further notice. This is specific to the community based residential facility (CBRF). There was action taken due to concerns regarding deficiencies in standards and quality of care at the CBRF, the severity of the environmental concerns.</p>

SCHEDULED ITEMS (CONTINUED):

	<p>It led to reports being sent to the state of Wisconsin, as well as to the City of Milwaukee Health Department. Several unannounced visits have occurred. This issue is ongoing at this time.</p> <p>b) Matt Talbot: Another one of our BHS adult agencies has had their corrective action plan approved in April 2024. Concerns related to the agency allowing an ineligible provider to provide services at the agency were identified. The corrective action also was related to noncompliance with DHS provider obligations and the staff roster add, delete process, ensuring that the agency has a current staff roster at all times. The course of action plan is being monitored on a regular basis. They identified measurable outcomes. They took immediate steps, including ensuring that their staff reviewed all department policies specific to the process and as well as viewed our tutorial related to the background check process. The add drop process as well as we are regularly reviewing their roster to ensure that all staff have been approved at their agency. This has not been rectified and is an ongoing corrective action plan at the agency.</p> <p>This Item was Informational.</p>
11.	<p>Department of Health and Human Services Quality Management Update.</p> <p>This item was held over from the March 3, 2024, meeting.</p> <p>A request to hold this item over again until a future meeting was presented as there was a staff departure and a replacement is being recruited. The committee acknowledged the request and approved the item to be presented in a future committee meeting.</p> <p>This Item was Informational.</p>
12.	<p>MC3 Steering Committee NIATx Storyboard Marketplace event on October 23, 2024.</p> <p>Each year is the NIATx Storyboard Marketplace event, which occurs on October 23, 2024 and all Mental Health Board members will be getting an invitation to attend that event from the Quality Committee. It is a collection of quality improvement projects and last year approximately 44 agencies participated. It will be held at the Zoofari Conference Center and will be a quite large event for the MC3 Steering Committee.</p> <p>This Item was Informational.</p>
13.	<p>Adjournment.</p> <p>Chairwoman Neubauer adjourned the meeting.</p>

SCHEDULED ITEMS (CONTINUED):

This meeting was recorded. The official copy of these minutes and subject reports, along with the audio recording of this meeting, is available on the Milwaukee County Legislative Information Center web page (below).

Length of meeting: 10:02 am – 11:47 am

Adjourned,

Jennifer Miles

Interim Committee Coordinator

**The next meeting for the Milwaukee County Mental Health Board
Quality Committee is scheduled for:
September 9, 2024, at 10:00 a.m.**

**To View All Associated Meeting Materials,
Visit the Milwaukee County Legislative Information Center at:
[Milwaukee County - Calendar \(legistar.com\)](https://legistar.com)**

**Visit the Milwaukee County Mental Health Board Web Page at:
<https://county.milwaukee.gov/EN/DHHS/About/Governance>**

Chairperson: Shirley Drake
Research Analyst: Kate Flynn Post, (414) 391-7845
Interim Committee Coordinator: Jennifer Miles, (414) 257-7639

**MILWAUKEE COUNTY MENTAL HEALTH BOARD
 QUALITY COMMITTEE**

Monday, March 4, 2024 - 10:00 A.M.
Microsoft Teams Meeting

MINUTES

PRESENT: Shirley Drake, Rachel Forman, Kenneth Ginlack, Dennise Lavrenz, Mary Neubauer

SCHEDULED ITEMS:

- | | |
|----|---|
| 1. | <p>Welcome.</p> <p>Chairwoman Drake welcomed everyone to the Milwaukee County Mental Health Board Quality Committee's March 4, 2024, remote/virtual meeting.</p> |
| 2. | <p>Minutes from the December 4, 2023, Committee meeting.
Informational</p> <p>The minutes from the December 4, 2024, meeting reviewed, acknowledged, and accepted by the Committee.</p> <p>This Item was Informational.</p> |
| 3. | <p>Quarter lag proposal for MHB Quality Committee materials</p> <p>Dr. Drymalski explained the need for a quarter lag in submitting materials.</p> <p>Dennise Lavrenz motioned to approve the proposal, Ken Ginlack seconded the motion, and Chairwoman Drake approved and asked if any questions. There were no questions. The Quality Committee unanimously agreed to recommend approval of the Quarter lag proposal for MHB Quality Committee materials.</p> <p>This is a Recommendation/Action Item for the Board.</p> |
| 4 | <p>Granite Hills Hospital 2023 Q4 Quality Reports</p> <p>Granite Hills uses paper charts, which makes it a little more challenging to extract the data. Overall Patient Referrals – 1049. Total Patient Admissions – 452. Barbara Jones explained the referrals not admitted, are usually picked up by other hospitals prior to our intake admission coordinator, Nancy reviewing the admission documentation.</p> |

Milwaukee County Mental Health Board
 Quality Committee
 March 4, 2024

SCHEDULED ITEMS (CONTINUED):

Patient Demographics:

Ages:

13-14 - 8.6%
15-17 - 11.4%
18-25 - 17.5%
25-35 - 20.1%
35-45 - 22.3%
46-55 - 11.5%
55-65 - 8.3%
65+ - 0.3%

Gender

Female: 43.9%
Male: 56.1%

Race/Ethnicity

Black - 45.77%
White - 44.03%
Other - 10.2%
Hispanic - 7.78%
Non-Hispanic - 92.22%

Marital Status

Divorced - 1.9%
Married - 3.5%
Single - 85.2%
Unknown/Other - 9.4%

Legal Status

Involuntary - 40.7%%
Voluntary - 59.3%

Utilization:

403 MHEC Referrals
215 MHEC Admissions
Adults - 171
Adolescents - 44
Male - 124
Female - 91

Average Length of Stay

6.8 days

Serving 40 + zip codes

Leather (4pt) restraints are not used: Physical holds 0.03 of 3873 days for every 1000 hours of patient care, WI average is 0.64. 0.27 patients in seclusion, WI average is 0.90.

Follow up Care

83% of patients discharged received complete record of inpatient psychiatric care and plans for follow up. WI average 48 %.
8.72% unplanned readmissions, National average 19.6%

Patient Satisfaction Survey

n = 311, 86% report they felt better at discharge than when they were admitted.
n = 309, 82% report they were satisfied with their treatment.
n = 310, 82% report their treatment goals and needs were met.

Chairwoman Drake inquired how many questions are on the survey? 15
Chairwoman Drake asked if marital status is necessary, Dennise Lavrenz and Mary Neubauer agreed and advised not to include marital status on future reports.
Dennise asked what are the benchmarks of other organizations? The goal for UHS is 90%.
Communication and transfers with MHEC is somewhat improving. There are no longer significant holes with regards to staffing. Still recruiting for a nursing supervisor. At this time, there are 48 beds available and are looking to add an additional 12 beds by summer.

This Item was Informational.

SCHEDULED ITEMS (CONTINUED):

5	<p>Policy and Procedure Quarterly Report</p> <p>Policy/Procedure Report displayed and explained. As of February 1, 2024 96.3% of policies are completed within the scheduled review period, with a goal of 96%. A total of 18 are overdue. A breakdown of due dates are found in the packet.</p> <p>This Item was Informational.</p>
6	<p>2023 Q4 Community Report and Dashboards: Community Access to Recovery Services (CARS), Community Crisis Services, and Children’s Community Mental Health Services and Wraparound Milwaukee</p> <ul style="list-style-type: none">a) CARS Quarterly Report with Narrative Summary A workgroup (Jen. W, fiscal, and quality) was set up to investigate dollars spent on black/white clients to gain a better understanding of the discrepancy. See packet for details of the report.b) 2023 Q4 Community Crisis Services Dashboard Updates Would like to separate Outpatient and Milwaukee Mobile crisis into 2 distinct dashboards as the services and needs of each are unique.c) BHS Wide Adult Services Dashboard Enrollment dates are a little off and are looking to cleaning this up. Would like to look at year over year in the next year when there is more data available. <p>Chairwoman Drake asked about Quality of Life (QOL) of staff. Cars Director, Jen. W was looking into staff turnover rate which is 19.25% within CARS. Turnover rates per year for Government employees in general is 20.00%.</p> <p>Dennise L. asked about QOL in general and if dollars will be spent to improve this for patients. Matt stated, social determinants go beyond the scope of CARS which will need a larger, wider approach within Milwaukee County services.</p> <p>Chairwoman Drake inquired about a specific zip code within MMC and if there is a connection with MHEC about this. Dr. J. Schneider replied pandemic and post-pandemic brought about changes. Each patient is unique with different goals and needs. Input & output can vary.</p> <p>BHS KPI Report – Children’s Community Mental Health Services and Wraparound Milwaukee</p> <p>Review of Clients Served and Costs for Wraparound, Reach, and CCS. Family satisfaction overall score for Q4 2023 is 4.6 with a goal of 4.0 or higher. There was a discussion of why services were no longer desired on the Discharge Outcome data.</p> <p>Ken Ginlack requested to look deeper into the reasons with a special chart just for reasons of why services are no longer desired.</p> <p>This Item was Informational.</p>

SCHEDULED ITEMS (CONTINUED):

7	<p>Community Contract Vendor Quality Updates: Sanctions, Holds, and Service Suspensions</p> <p>a) Sebastian Family Psychology Practice, LLC, CCS - Referral Suspension Lifted</p> <p>Sebastian Family Psychology Practice were notified on 1/12/24, will be allowed to resume referrals, effective 1/25/24.</p> <p>This Item was Informational.</p>
8	<p>Children’s Community Contract Vendor Quality Updates: Sanctions, Holds, and Service Suspensions</p> <p>a) After long session of verifying documentation, Exodus Family Services repaid the money in full, which was identified from auditing.</p> <p>b) Exodus also hired a part time person to review compliance.</p> <p>This Item was Informational.</p>
9	<p>Community Outpatient Services Report</p> <p>Provided a summary of the Access Clinics which centers around Connection, Compassion, and Healing.</p> <p>a) Reports all clinics were strategically placed to be easily accessed in the community served.</p> <p>b) All clinics have a variety level of staff and services with the ability to see someone in crisis on a same day basis depending on their specific circumstance.</p> <p>Dr. Cole received many compliments for his presentation, which touched the hearts of others.</p> <p>This Item was Informational.</p>
10	<p>Department of Health and Human Services Quality Management Update</p> <p>TJ Cobb was out of the office today. This Item will be added to the May Quality Committee agenda.</p>
11	<p>2024 Tentative Schedule and Submission Calendar</p> <p>June 3, 2024, at 10 a.m. September 9, 2024, at 10 a.m. December 2, 2024, at 10 a.m.</p> <p>This Item was Informational.</p>

SCHEDULED ITEMS (CONTINUED):

12 Adjournment.

Mary Neubauer announced she will be staying active with Board activities and was recently appointed as Chairwoman of the Milwaukee County Mental Health Board.

Shirley Drake was recently appointed as Secretary of the Milwaukee County Mental Health Board.

Meeting was adjourned.

This meeting was recorded. The official copy of these minutes and subject reports, along with the audio recording of this meeting, is available on the Milwaukee County Legislative Information Center web page (below).

Length of meeting: 10:03 am – 11:41 am

Minutes taken by Vicki Orzel, Quality Coordinator.

Adjourned,
Vicki Orzel, Quality Coordinator
Milwaukee County Mental Health Board

The next meeting for the Milwaukee County Mental Health Board Quality Committee is scheduled for June 3, 2024.

To View All Associated Meeting Materials, Visit the Milwaukee County Legislative Information Center at:

[Milwaukee County - Calendar \(legistar.com\)](#)

Visit the Milwaukee County Mental Health Board Web Page at:

<https://county.milwaukee.gov/EN/DHHS/About/Governance>

4

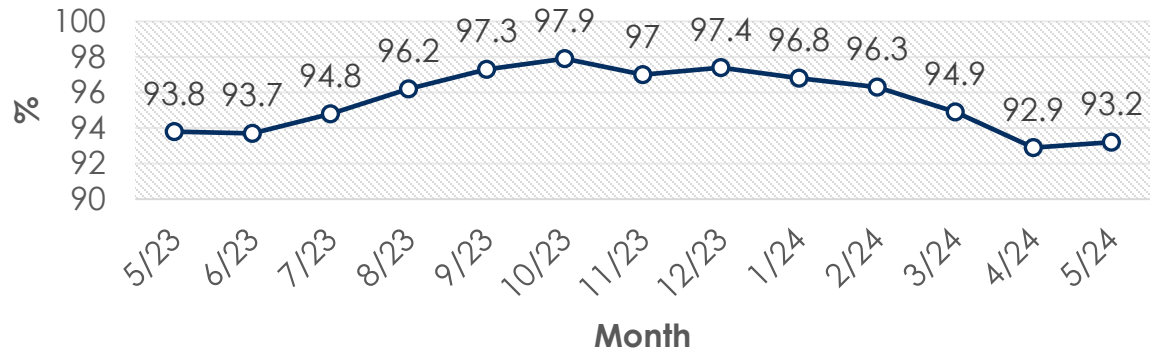
Baseline 71.5% as of August 2016 LAB report

Overall Progress 93.2% as of May 1, 2024

Current Goal = 96%

Review period	Number of Policies		Percentage of total	
	Last Month	This Month	Last Month	This Month
Within Scheduled Period	447	426	92.9%	93.2%
Up to 1-year Overdue	31	27	6.4%	5.9%
More than 1 yr & up to 3 yrs overdue	3	4	0.6%	0.9%
More than 3 yrs & up to 5 yrs overdue	0	0	0%	0%
More than 5 yrs & up to 10 yrs overdue	0	0	0%	0%
Total	481	457	100%	100%

Monthly Rate Trends



Past Due by Policy Area	Past Due	Number of Policies coming due in the next 12 months	
		Month/Year	# Due
BHS - Administration	2	May 2024	13
BHS - Health Information/HIPAA Privacy & Security	3	June 2024	17
BHS - Nursing	4	July 2024	19
Community Access to Recovery Services (CARS)	3	August 2024	16
Emergency Management	2	September 2024	9
Emergency Management- Confidential	1	October 2024	7
Engineering & Environmental Services- Operations	2	November 2024	7
Environment of Care	2	December 2024	95
Fiscal	1	January 2025	9
Human Resources	7	February 2025	11
Patient Rights	3	March 2025	3
Pharmacy	1	April 2025	13
Safety	1	May 2025	2
Volunteer Services	1	Last Month's Activity	
Wraparound (Wrap, REACH, youth CCS)- Vendor	1	New Policies	1
Total	34	Reviewed/Revised	24
		Retired	0



Review of 2023 Admission Data Behavioral Health Services

FOR MHB QUALITY COMMITTEE
Version 5/10/2024



Objective:

REVIEW NETWORK ADMISSION AND PATIENT FLOW
DATA WITH EMPHASIS ON MHEC, UHS GH AND WMHI.

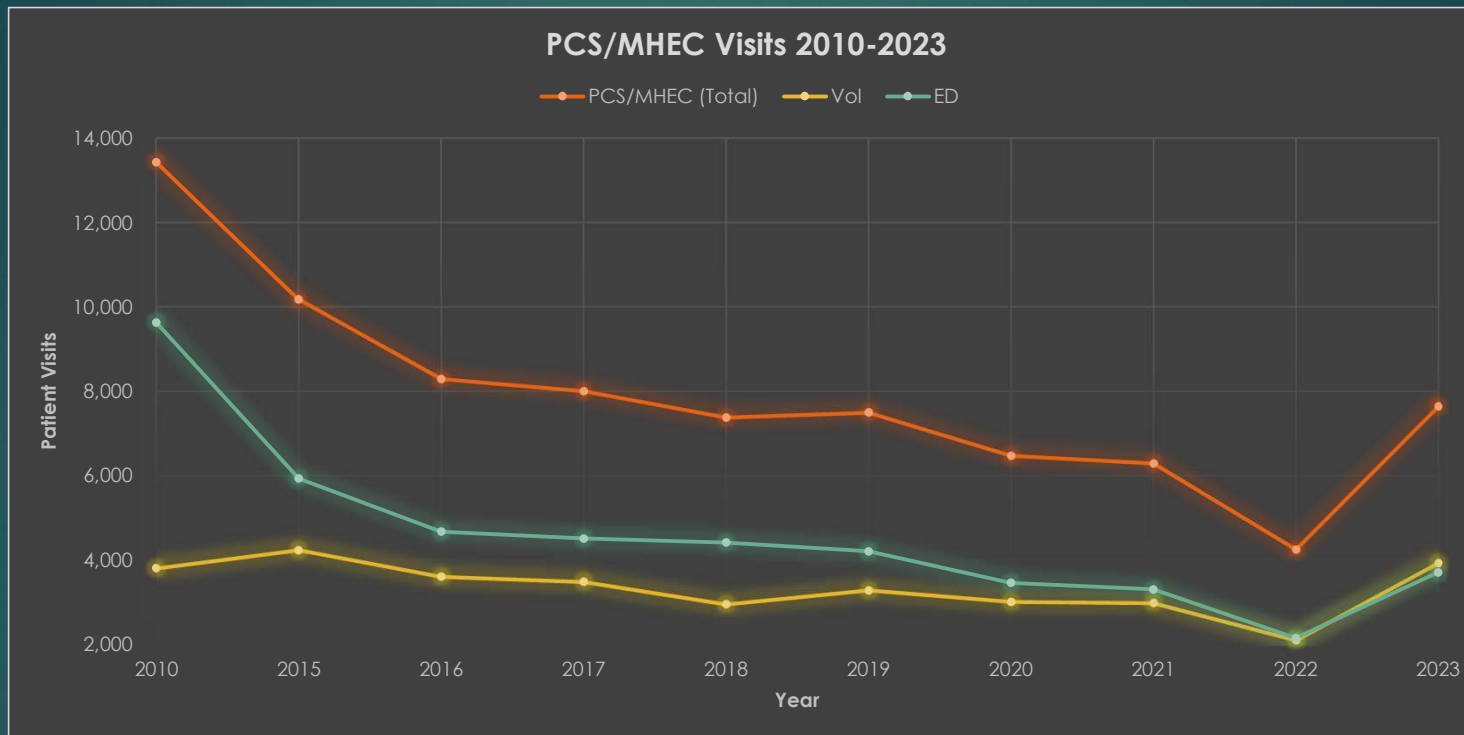
Agenda:

1. Review of PCS/MHEC Visits 2010 to 2023
2. PCS/MHEC Transfers to Regional IMDs 2015 to 2023
3. BHS Admissions to WMHI 2023 and Historical
4. Change of Venue admits to WMHI 2023
5. System Flow: Comparison MKE to Waukesha and Full MHEC 2023 data set



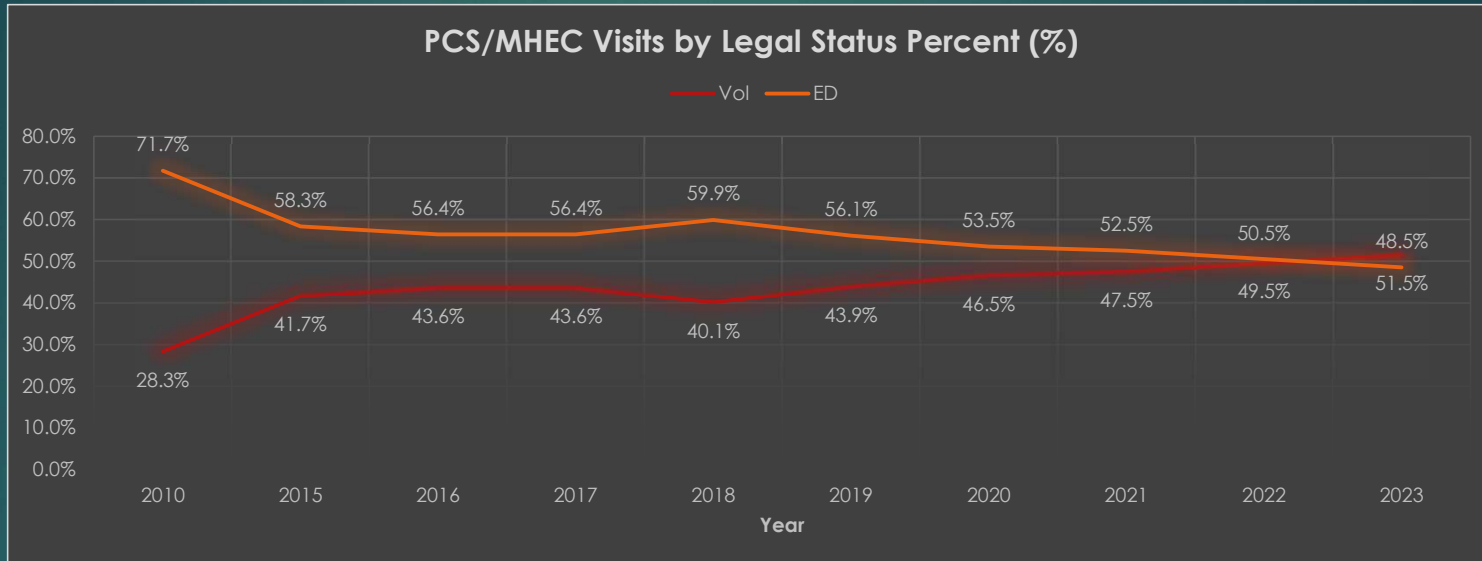
Review of PCS/MHEC data 2010-2023

2010-2023 PCS and MHEC Visits



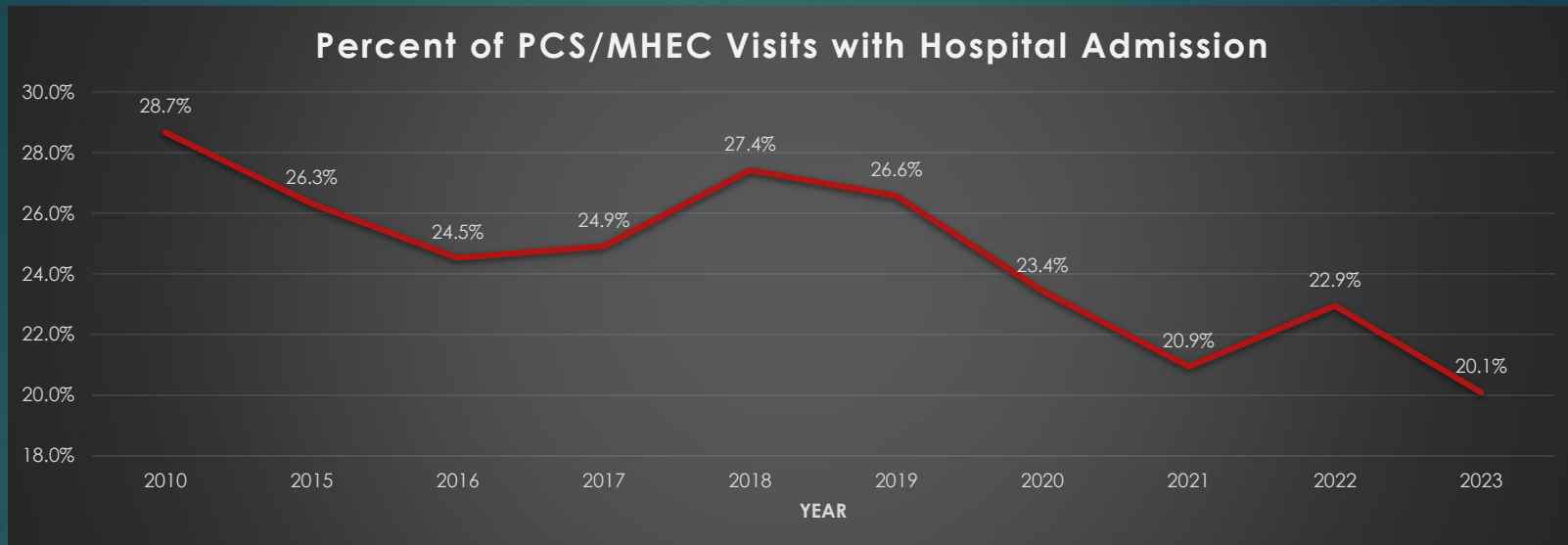
Year	2010	2015	2016	2017	2018	2019	2020	2021	2022	2023
PCS/MHEC	13,443	10,173	8,286	8,001	7,375	7,492	6,471	6,289	4,254	7,641
Vol	3,808	4,238	3,611	3,488	2,958	3,287	3,012	2,987	2,106	3,934
ED	9,635	5,935	4,675	4,513	4,417	4,205	3,459	3,302	2,148	3,707

2010-2023 Visits by Legal Status Percent (%)



Year	2010	2015	2016	2017	2018	2019	2020	2021	2022	2023
Vol	28.3%	41.7%	43.6%	43.6%	40.1%	43.9%	46.5%	47.5%	49.5%	51.5%
ED	71.7%	58.3%	56.4%	56.4%	59.9%	56.1%	53.5%	52.5%	50.5%	48.5%

2010-2023 % PCS/MHEC Visits with Admit

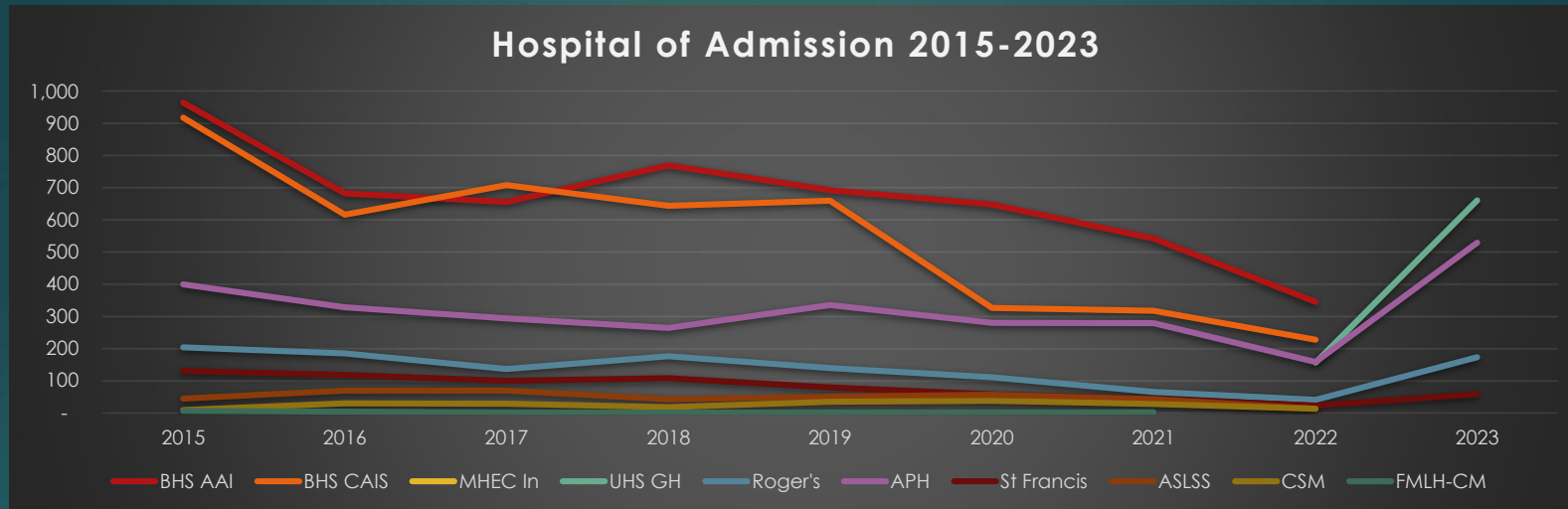


Year	2010	2015	2016	2017	2018	2019	2020	2021	2022	2023
% Admit	28.7%	26.3%	24.5%	24.9%	27.4%	26.6%	23.4%	20.9%	22.9%	20.1%



PCS/MHEC transfers to regional hospitals 2015-2023

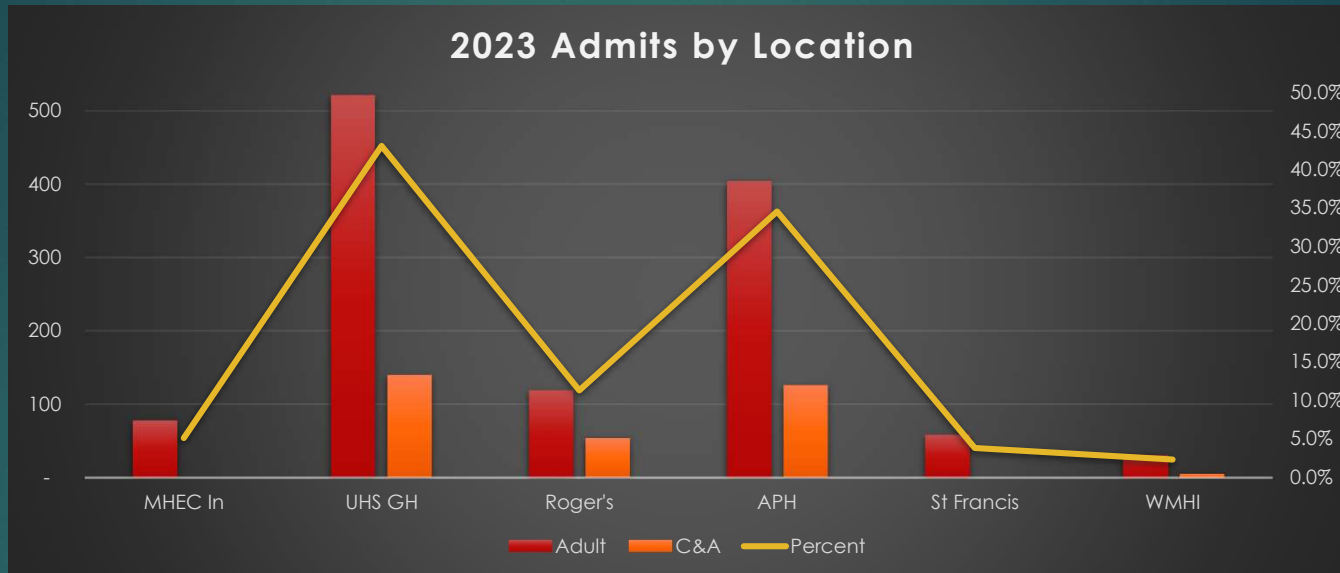
2015*-2023 Location of Admits



NOTE: MHEC and UHS GH are NOT on this Table

Year	2015	2016	2017	2018	2019	2020	2021	2022	2023
Roger's	204	185	136	176	139	111	65	40	173
APH	400	328	294	264	335	280	279	158	530
St Francis	131	117	100	108	79	57	43	23	58
ASLSS	44	69	69	42	50	56	42	13	
CSM	9	29	28	17	34	37	27	13	
FMLH-CM	6	4	1	1	1	1	2		

2023 MHEC Admits by Location

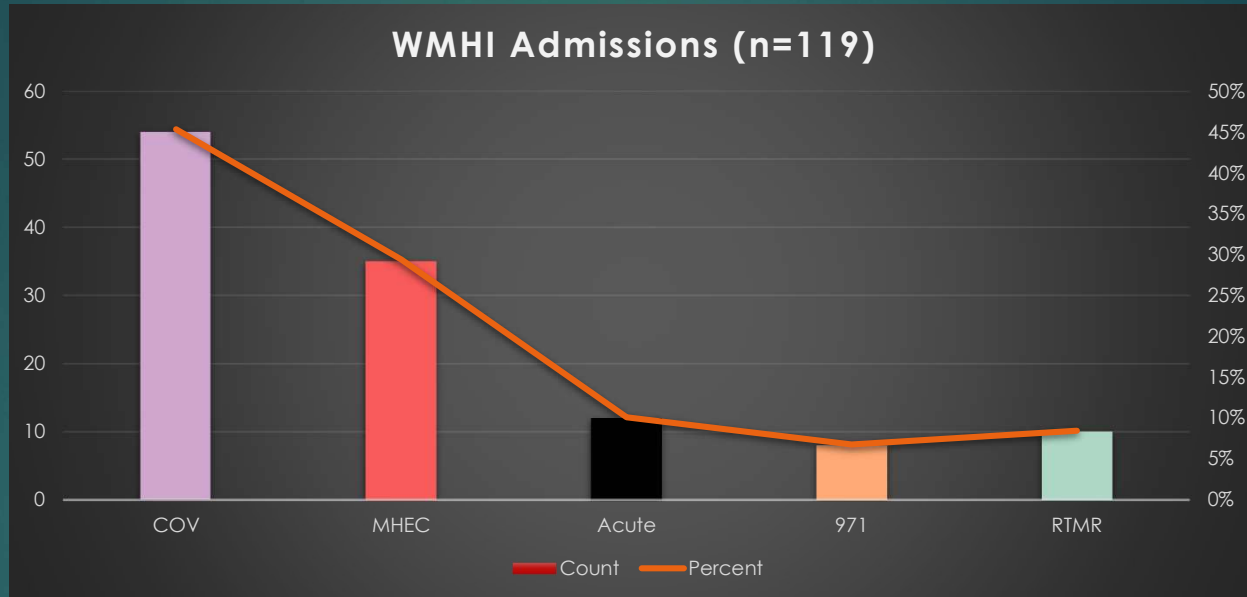


	Adult	C&A	Percent
MHEC In	78		5.1%
UHS GH	521	140	43.1%
Roger's	119	54	11.3%
APH	404	126	34.5%
St Francis	58	NA	3.8%
WMHI	30	5	2.3%



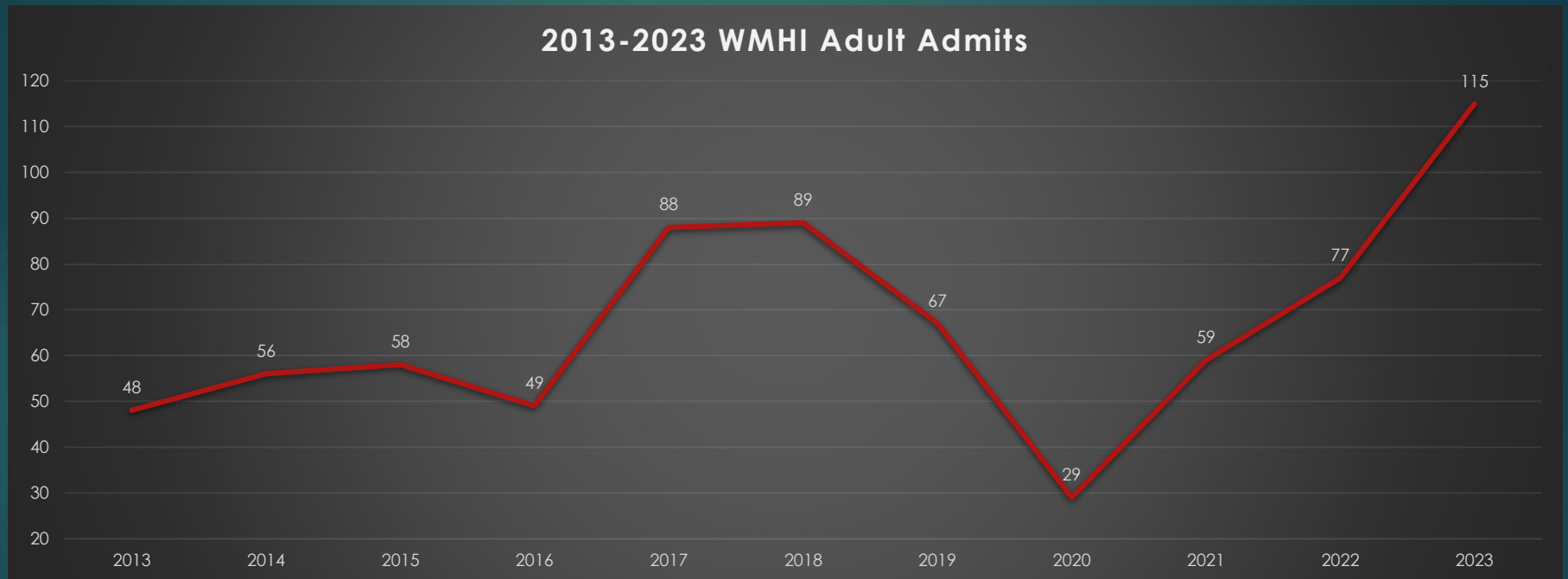
BHS Admissions to WMHI

2023 WMHI Admissions



Total WMHI		COV	MHEC	Acute	971	RTMR
119	Count	54	35	12	8	10
	Percent	45%	29%	10%	7%	8%
24.93	LOS	16.87	26.5	44.00	40.67	54.56
1	Min LOS	1	3	7	12	7
166	Max LOS	111	166	131	42	57

Historical Admissions to WMHI 2013-2023

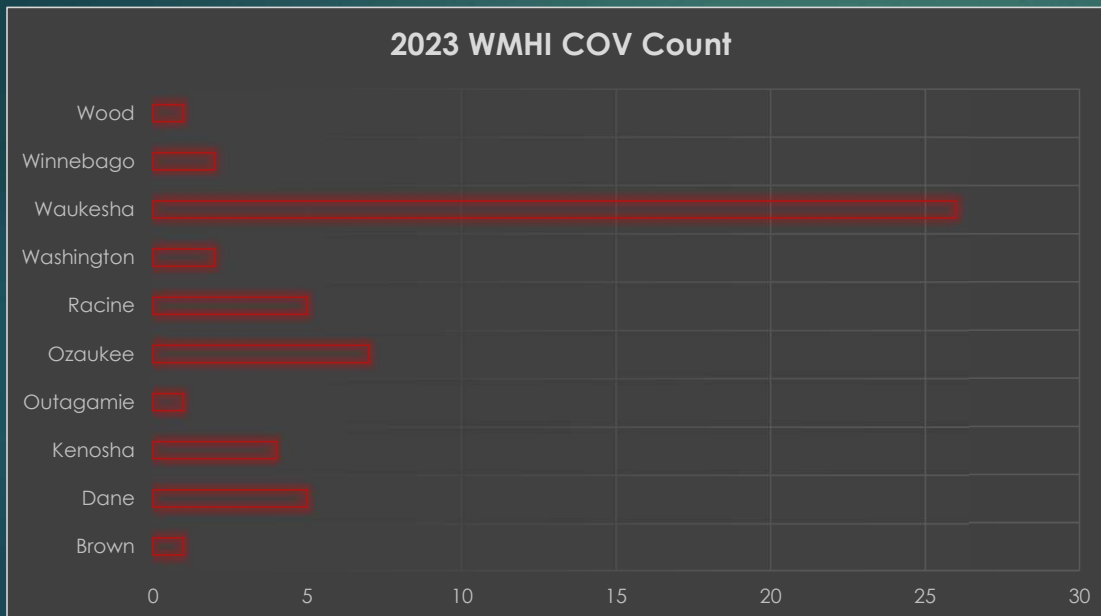


Ave 2013-2022: **62** +/- 18
Data from WMHI report.



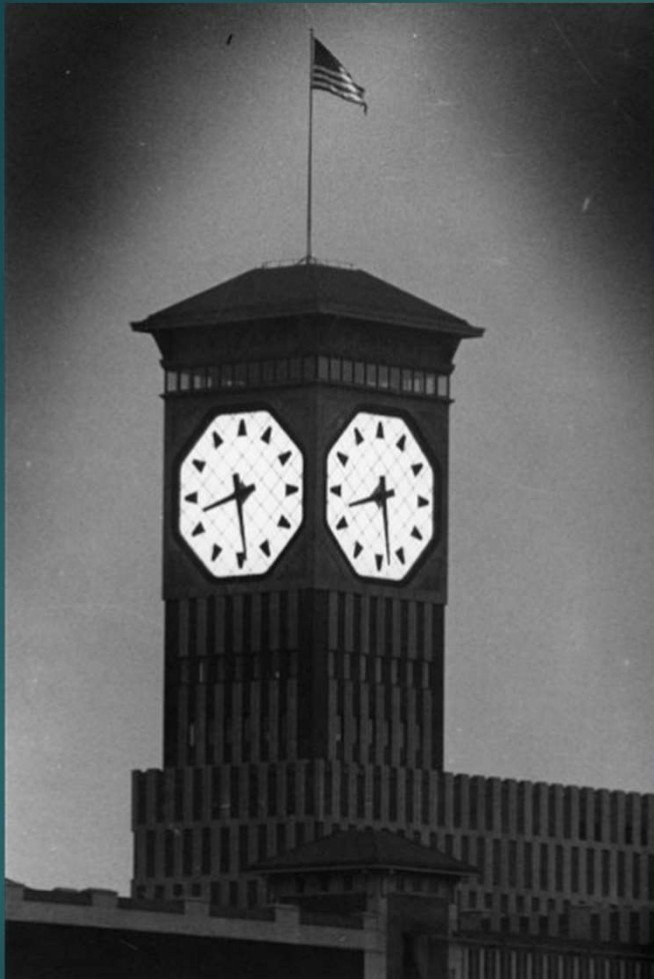
Change of
Venue admits
to WMHI 2023

2023 WMHI COV Cases



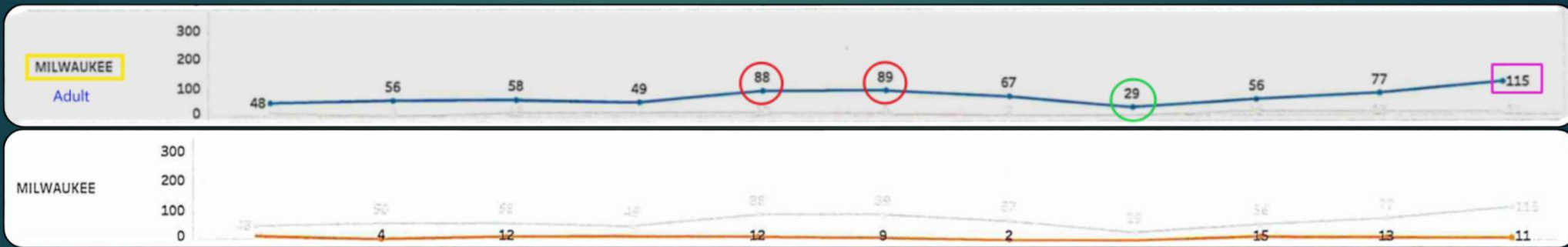
From	Num	Ave	LOS	
			Min	Max
Brown	1	6.0	6	6
Dane	5	11.2	9	13
Kenosha	4	8.3	7	10
Outagamie	1	4.0	4	4
Ozaukee	7	18.7	9	57
Racine	5	24.0	7	47
Washington	2	10.0	7	13
Waukesha	26	19.3	1	111
Winnebago	2	10.5	5	16
Wood	1	18.0	18	18

2023 Total WMHI Admits via COV to MKE Co. N = 54



System Flow:
Comparison MKE to
Waukesha and Full
MHEC 2023 data set

WMHI Admits - Regional Comparison 2013-2023



MKE 10 Year Average (2013-2022) **Adult** 62 COV +/- 18

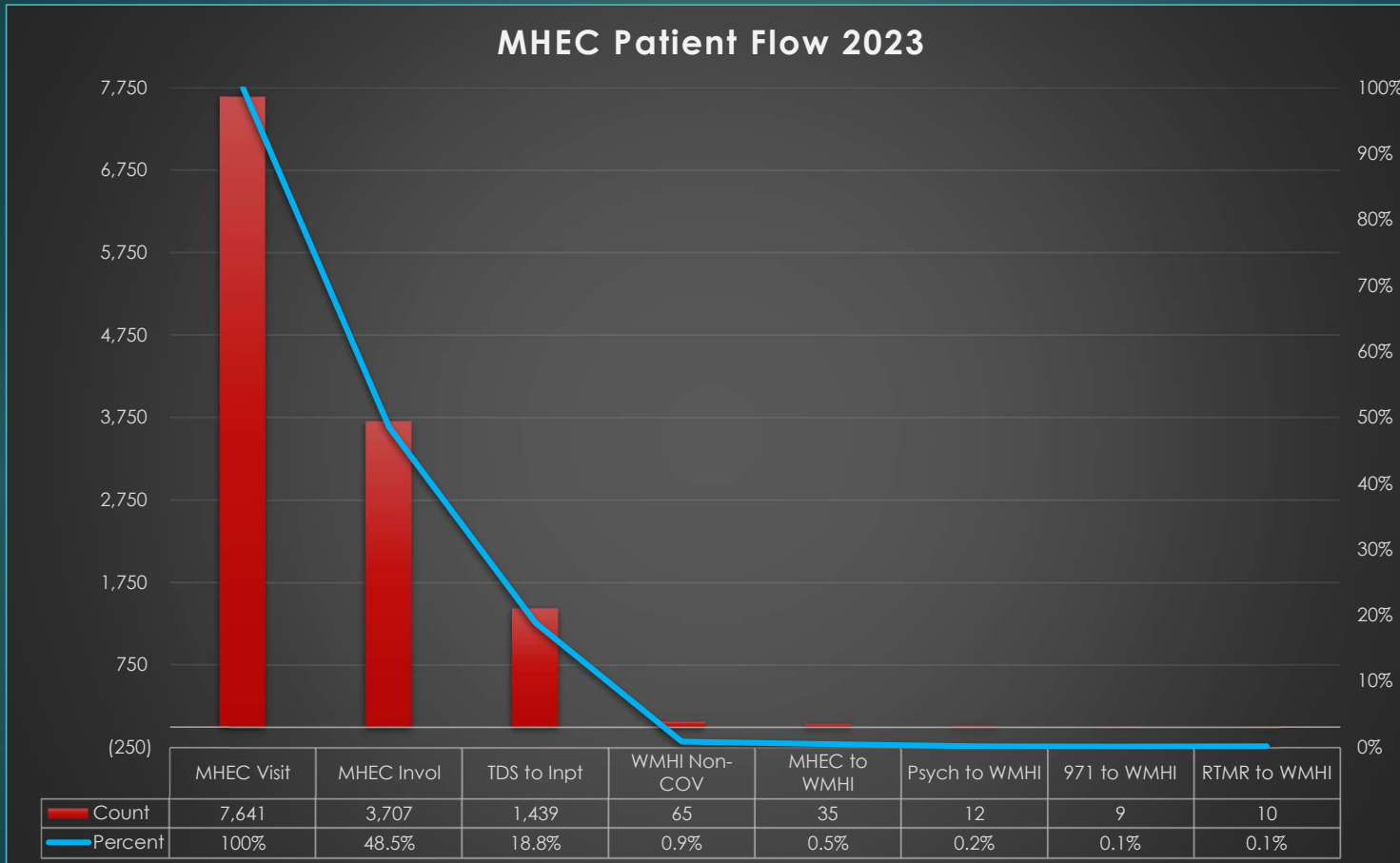
- ▶ **2017⁺**, **2018⁺** and **2020** Outlier years.
- ▶ 2023s **115** is 2x 10-year average.

Compare Waukesha, suburban adjacent county for rate of WMHI use per 10,000 citizens:

- ▶ Waukesha **120** / (410,273 / 10,000) = **2.92**
- ▶ Milwaukee **115** / (916,205 / 10,000) = **1.26**



MHEC System Flow 2023



A scenic view of a coastal path with a wooden railing overlooking the ocean under a cloudy sky. The path is dirt and runs along a grassy cliffside. The railing is made of dark wood and follows the curve of the path. In the background, the ocean is visible, and the sky is filled with dark, heavy clouds. The overall mood is somber and atmospheric.

Questions and Answers

Client Rights at Milwaukee County Behavioral Health Services

Presentation to the Mental Health Board Quality Committee
June 3, 2024

Jenn Pyles, Client Rights Specialist and CLAS Standards
Implementation Lead



Client Rights Specialists (CRS)

- Jenn Pyles 414-257-7469
- Jennifer.pyles@milwaukeecountywi.gov
- Vicki Orzel 414-299-0063
- Vicki.orzel@milwaukeecountywi.gov

Wraparound/ Children's Staff

- Laura Pittman 414-704-5151
- Laura.pittman@milwaukeecountywi.gov
- Holly McElhatton 414-639-7810
- Holly.Mcelhatton@milwaukeecountywi.gov



Overview

- Understanding the role of client rights and grievances
- 2023 process improvements
- 2023 grievance/ complaint summary
- 2024 goals



What does a Client Rights Specialist do?

- Help clients resolve concerns about services they receive from a program or provider.
- Review grievances and make recommendations for resolution
- Advocate and educate on client rights issues and compliance



Why are Client Rights Important?

- Prevent ethics complaints and lawsuits filed by clients who allege that mental health professionals violated their rights
- Help define how clients should be treated while receiving a community- based service
 - Standardizes care across healthcare fields
 - Enables clients to have uniform expectations during treatment
- Empowers people to take an active role in improving their health
- Mandated by DHS 94



What is the Grievance Process

A set of steps to follow when a client has a concern regarding their care or treatment.



Why is this process important?

- Resolves disputes in a fair and transparent way
- The documentation process makes it difficult for complaints to go ignored (i.e.: We didn't know there was a problem with racial discrimination)
- Protects the client from receiving punishment if they appeal
- Helps identify areas for process improvement



Improvements

1. Reinforced and enhanced the grievance process
2. Educated internal and external service providers on process
3. Strengthened policy
4. Enhanced communication with external providers
5. Enriched relationship with state grievance examiner



Reinforced and enhanced the grievance process

- Defined processes for:
 - Notifying someone of potential Client Rights violation
 - Granting of emergency timeframes
 - Need to contact agency for level 1 grievance
 - Granting of 45-day filing extensions
 - Proposing new timeframes to allow longer investigation
 - Formal and informal grievance findings.
- Designed letter templates
- Developed documentation standards



Educated internal and external service providers on process

- Partnership on Client Rights Forum with Wraparound
- Clarified contract language on client rights
- Edited and revised new training for Workforce Training and Development on client rights at onboarding
- Attendance at All-Provider meetings with updates on client rights topics
- Train the Trainer to service managers for internal staff
- Provide program managers with informative emails on the process when a grievance or complaint arises that outlines their expectations and role.



Strengthened Policy

- User friendly language
- Took out hospital references
- Streamlined flow chart
- Replaced outdated attachments in accordance with newer state communication
- Addition of posthumous investigations
- Addition of provider grievances



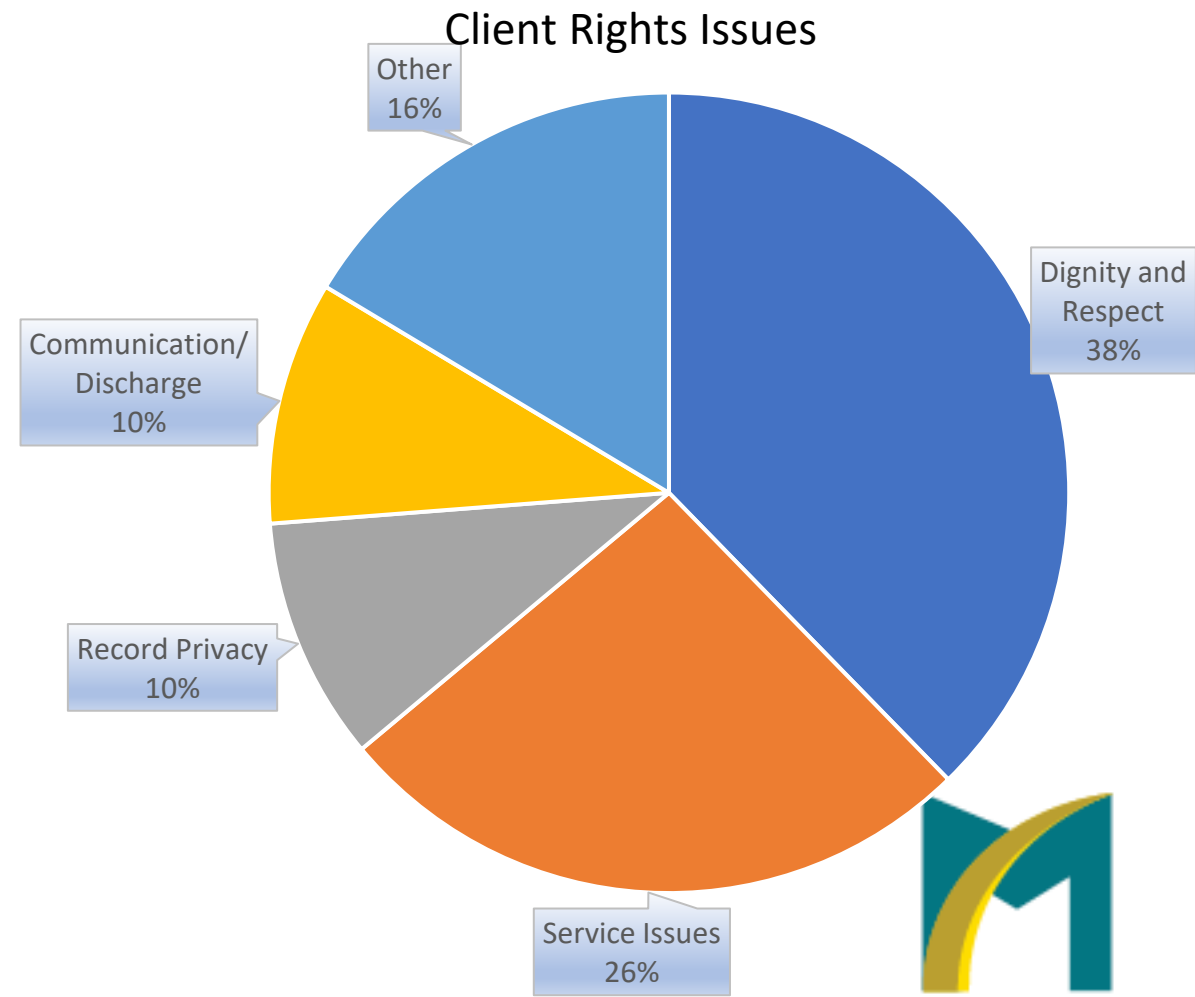
Enhanced Communication with Providers

- Developed process for warm hand off when concerns need to be heard at Level 1
- Created spreadsheet of all CRS and back up CRS and contact numbers/ emails.
- Designed process for partnering on investigations per DHS 94.48



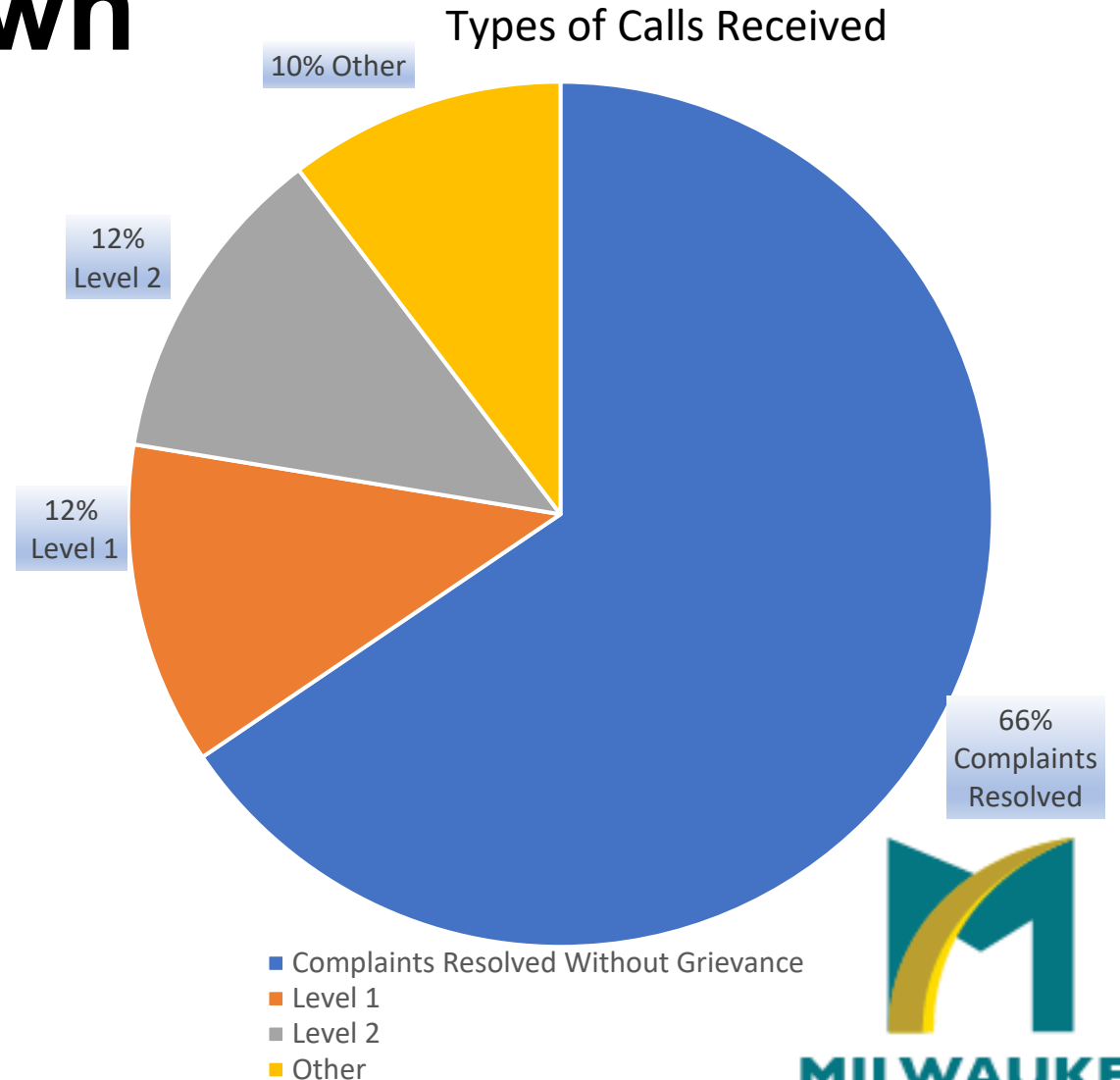
2023 Client Rights Issues

- Largest number of grievances is client's stating they are not being treated with dignity and respect. 38%
- 26% Service Issues
- 10% Record Privacy
- 10% Communication/ Discharge planning
- 16% Other
 - 7% rep payee/ management of personal funds
 - 6% Grievance process
 - 4% Secure storage space/ thefts
 - 1% Consents
 - 1% Isolation
 - 1% Medication



Grievance Breakdown

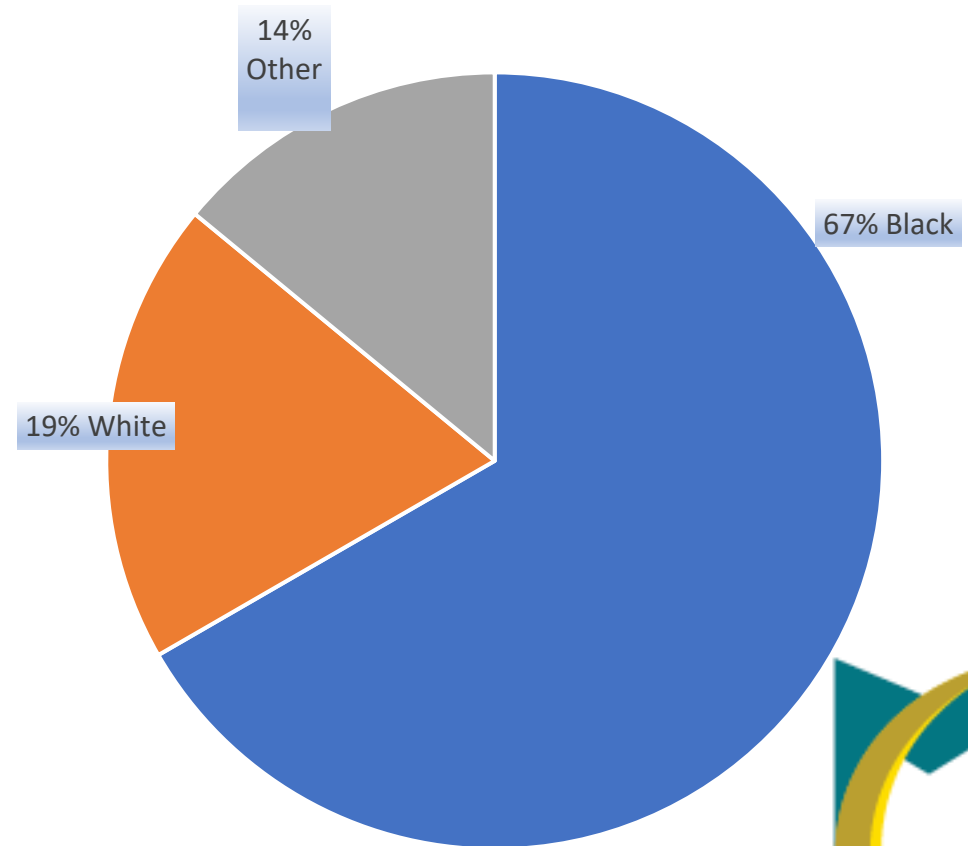
- Adult/ Mobile Crisis: 36 unique client.
- Wraparound: 22 unique clients
- Ranging from 30 minutes to 60+ hours worth of work. On average, each client is about 10 hours of work.
- 16 were complaints that were resolved without the grievance procedure. (All 22 in Wraparound)
- 7 Level 1 grievances
 - 5 were sent to Level 1 agency
 - 2 internal (BHS Level 1)
- 7 Level 2 grievances
- 6 Other
 - 2 informal grievances
 - 2 that spread across multiple grievances
 - 2 were not BHS clients



Who are our Callers?

- Adult and Mobile Crisis ages
 - 100% between the ages of 30 and 64.
 - 73% age 45-64 (Born between 1957 and 1978).
 - 27% age 30-44 (Born between 1979 and 1994).
- Wraparound ages
 - 68% age 0-17 (2006 and prior)
 - 32% age 18-23 (2000-2005)
- 53% male, 44% female, 3% non-binary

Caller Racial Demographics



■ Black ■ White ■ Other

What's Next?

GOAL 1: Improve our Client experience

GOAL 2: Coordinate processes across DHHS

GOAL 3: Continue to enhance provider education and communication



2024 Initiatives

- Develop larger integrated DHHS policy with offshoot BHS policy
- Strategic networking and case coordination with Chief Compliance Officer- Safety, Risk, and Population Health
- Create Client Rights Website
- Develop better mechanisms for data tracking and client documentation
- Survey all client's satisfaction with grievance process
- Qualitative and quantitative data presentation at Mental Health Quality Board



Questions?





**MILWAUKEE
COUNTY**

PPS Non-Episodic Implementation Status Update

Preliminary Results

MHB Quality Committee Meeting

June 3rd, 2024

Context



Implemented a non-episodic form of PPS in February of 2023 – intended to reduce data collection burden



Removed non-essential items and added questions related to SDOHs



Provided training and education and built monitoring mechanisms to ensure completeness

Benefits

- Potential to collect SDOH data on all the clients we serve (regardless of program)
- Ability to track changes in self-reported SDOHs over time
- Reduction in data collection burden for providers and clients



Benefit 1

Collecting SDOH data on all the clients we serve

Benefit 1: Collecting SDOH Data on All Clients BHS Serves

- The Quality and Research Team has already built an All BHS Adult Services Dashboard using the SDOH data



The BHS Wide Adult Services Dashboard

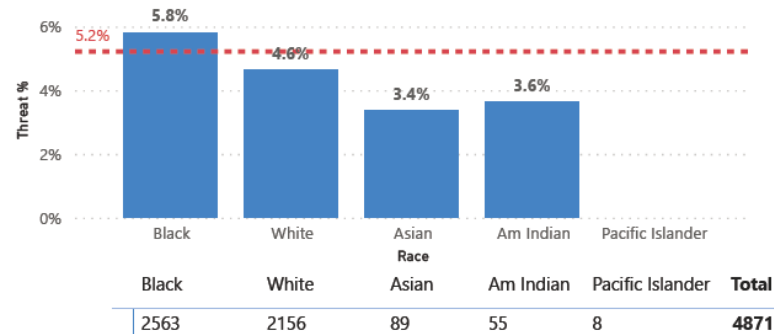
The BHS Wide Adult Services Dashboard includes the clients served by the Community Access to Recovery Services (CARS) and Crisis Departments is reported as a single population. This helps to reinforce the Milwaukee County DHHS "No Wrong Door" philosophy at Milwaukee County Behavioral Health Services (BHS) because it depicts BHS as a single continuum of care, with multiple front doors and a single population of clients served.

Further, this dashboard also presents data on the social determinants of health (SDOH). As noted in the first iteration of this dashboard, we are collecting more comprehensive data on social needs for all BHS clients, and this data set is growing. The number of clients on whom we had clinical and SDOH data averaged 4967 clients per question in the Q4 2022 to Q3 2023 version of this dashboard, whereas that number jumped to 5506 in this iteration, an increase of nearly 11%.

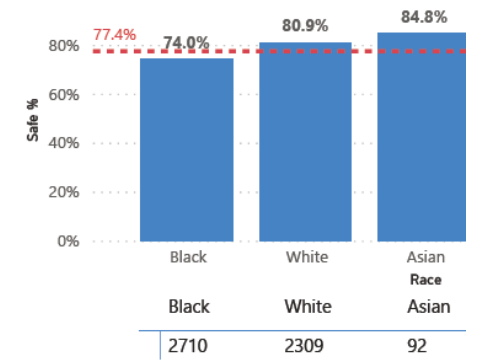
The SDOH data are organized using the County Health Rankings and Roadmaps framework published by the University of Wisconsin's Population Health Institute. We look forward to utilizing this data to understand the needs of the clients we serve and track the outcomes/impact of

Social Economic Factors

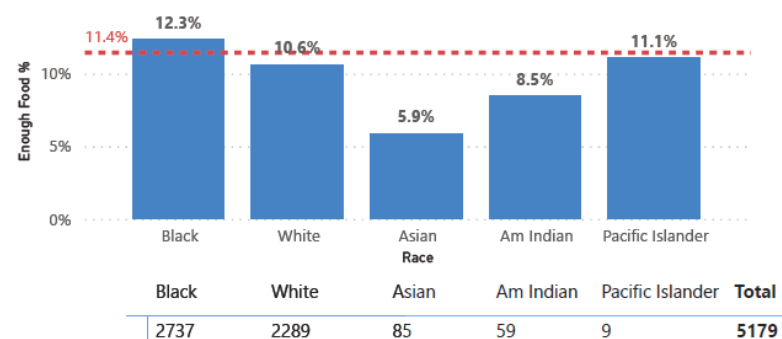
How Often Does Anyone Physically, Emotionally, or Verbally Hurt or Threaten You (Fairly Often, Always, Frequently)



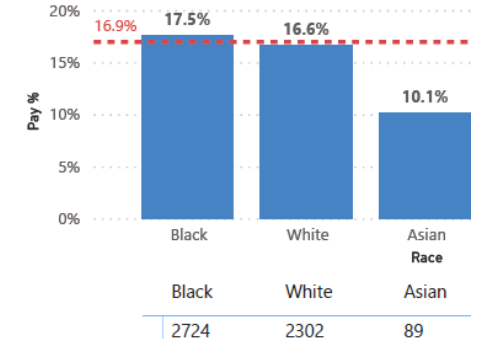
Do You Feel Safe Where You Live (Usually, Always)



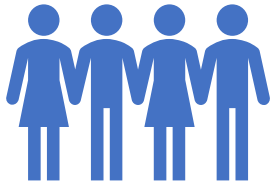
In the Past 6 Months, You Worried That Your Food Would Run Out Before You Got Money To Buy More (Usually, Always)



How Often is it Difficult For You To Pay for the Medical Care and Heating (Usually, Always)



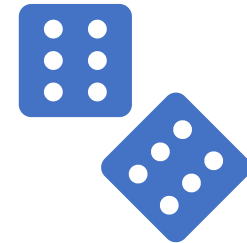
Benefit 1: Continued...



Opportunity for broader evaluation
of entire population



Opportunity to generate more
referrals based on more
comprehensively identified needs



Opportunity to use SDOH data for
risk adjustment in future analyses of
cost, outcome, value, etc.

Benefit 2

Track changes in self-reported SDOHs over time

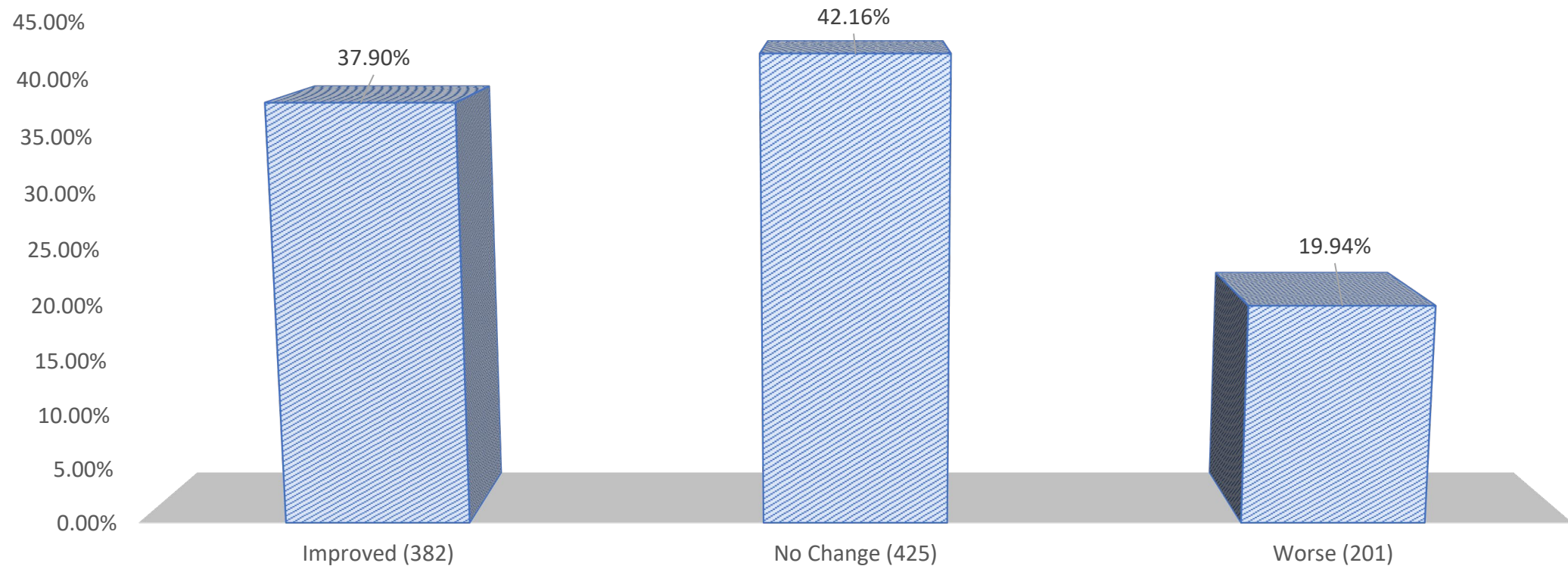
Benefit 2: Using SDOHs as an Outcome

- Since February of 2023, there were 1008 clients with:
 - At least one pair of SDOH questions with complete data as of the first and last assessment
 - At least 30 days between the first and last assessment
 - Client were evaluated based on change status

Change Status Definition	Status
Endorsed fewer SDOH needs at their last assessment relative to their first	Improved
Endorsed more SDOHs at their last assessment relative to their first	Worse
Endorsed the same number of SDOHs at their last assessment relative to their first	No Change

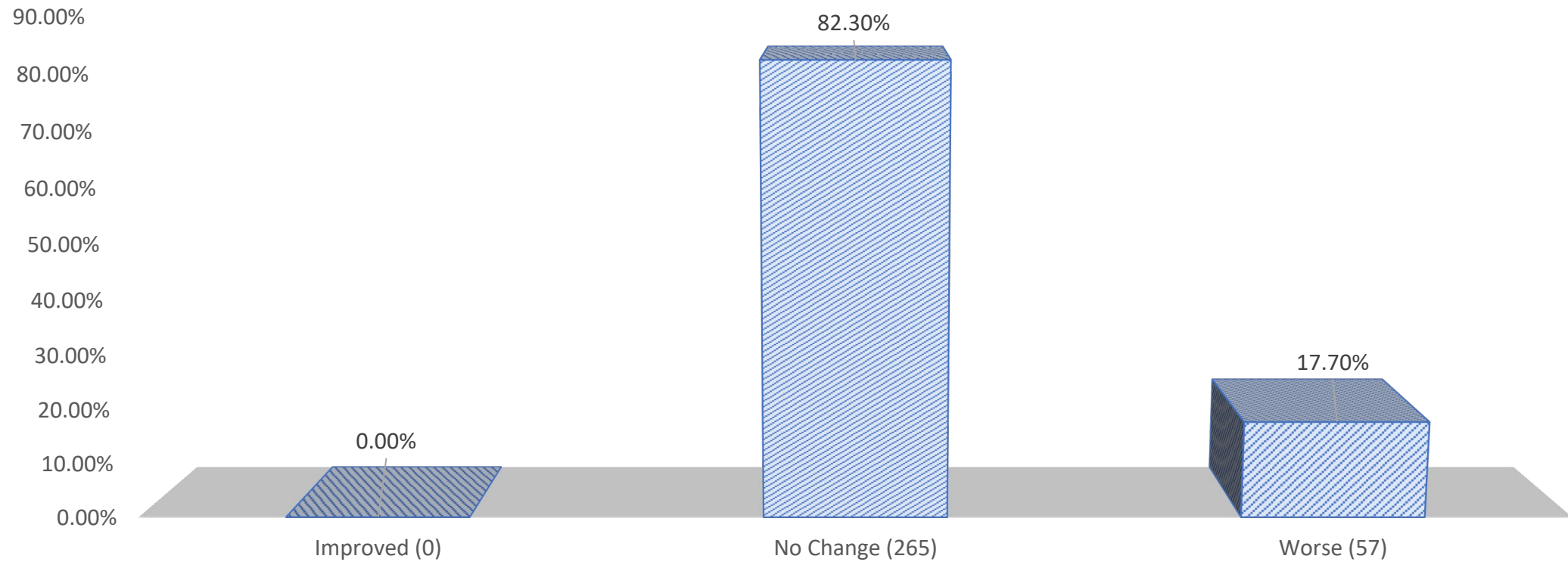
Change Status: Proportion of Clients Who Either Improved, Remained Unchanged, or Got Worse

PERCENT BY CHANGE CATEGORY (ALL N=1008)



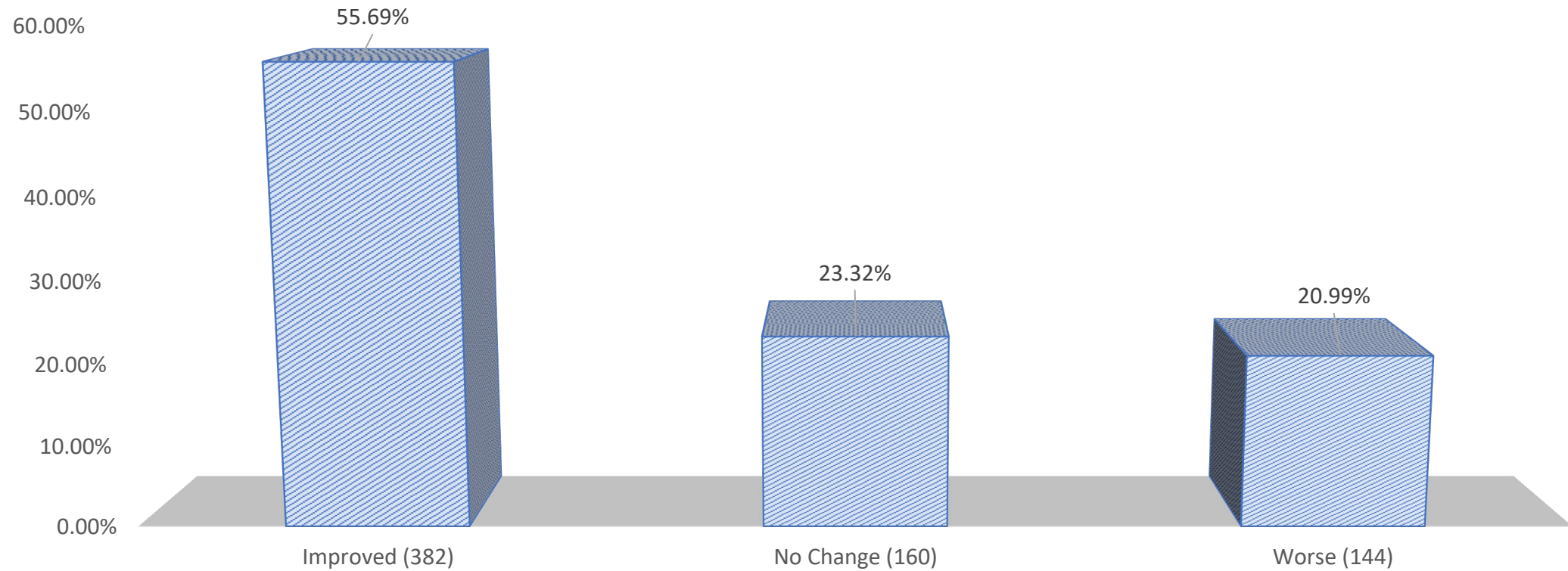
Clients with 0 Endorsed SDOHs at Intake

PERCENT BY CHANGE CATEGORY (ALL N=322)



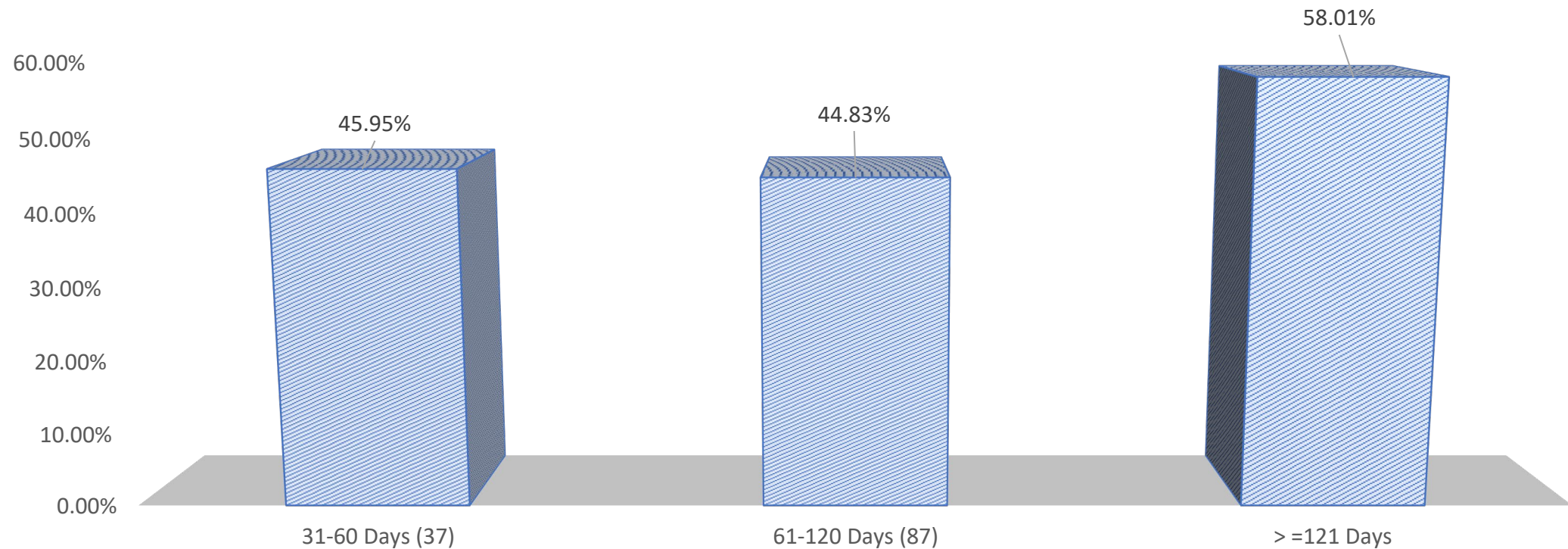
Clients with *At Least 1* Endorsed SDOH at Intake

PERCENT BY CHANGE CATEGORY (ALL N=686)



Change Status as a Function of Enrollment Length: Clients with *At Least 1* SDOH at Intake

PERCENT IMPROVED BY LENGTH OF ENROLLMENT (ALL N=686)



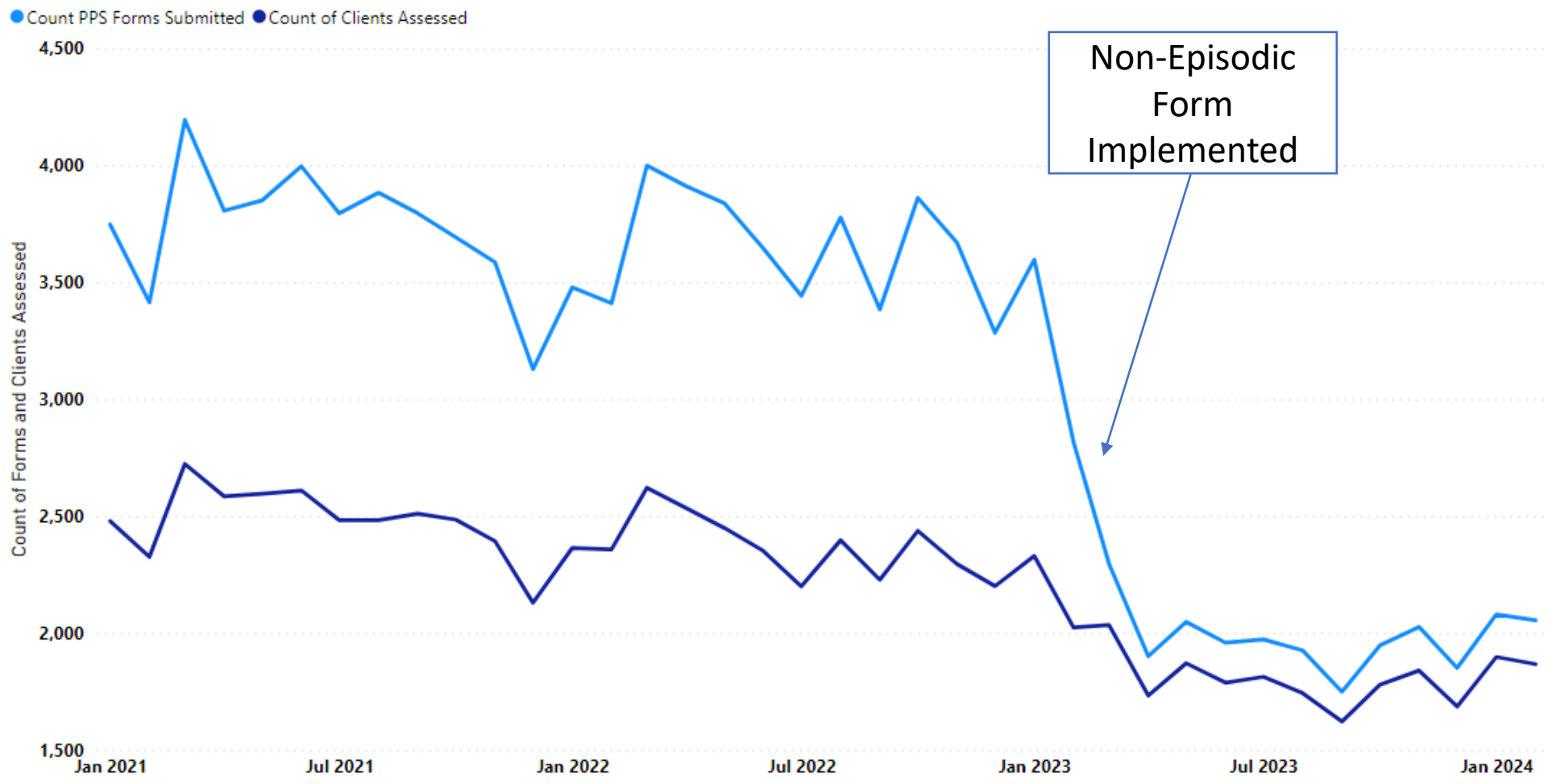
Benefit 2: Continued...

- Composite metric is a straightforward, user friendly, and comprehensive way to display multiple SDOHs at the same time
- Composite metric has potential to track change over time as a system outcome
- Further analyses should explore:
 - Is change in SDOHs related to QOL, acute service use, etc.), and
 - Do SDOHs individually or in composite predict subsequent outcomes post treatment, such as mortality, return to services, etc.
- What is the optimal enrollment length to maximize improvement, and can this be broken down by client presentation and need?

Benefit 3

Reducing data collection burden for providers and clients

Count PPS Forms Submitted and Count of Clients Assessed by Year, Quarter and Month



Benefit 3

- Although the SDOHs were exciting, one of the largest benefits of the implementation had to do with reducing administrative burden

Benefit 3: Continued...

- In the year prior to implementation, clients averaged 3.22 assessments per year
- In the year subsequent to implementation that ratio dropped to 1.77
- This translated into a reduction of nearly 20,000 (~19,529) PPS assessments per year!

Ratio of Assessments Per Client Per Month

Ratio by Year, Quarter and Month



Quantifying the Savings

- Estimating 3 minutes (on the low end) per completed assessment, this translates into:

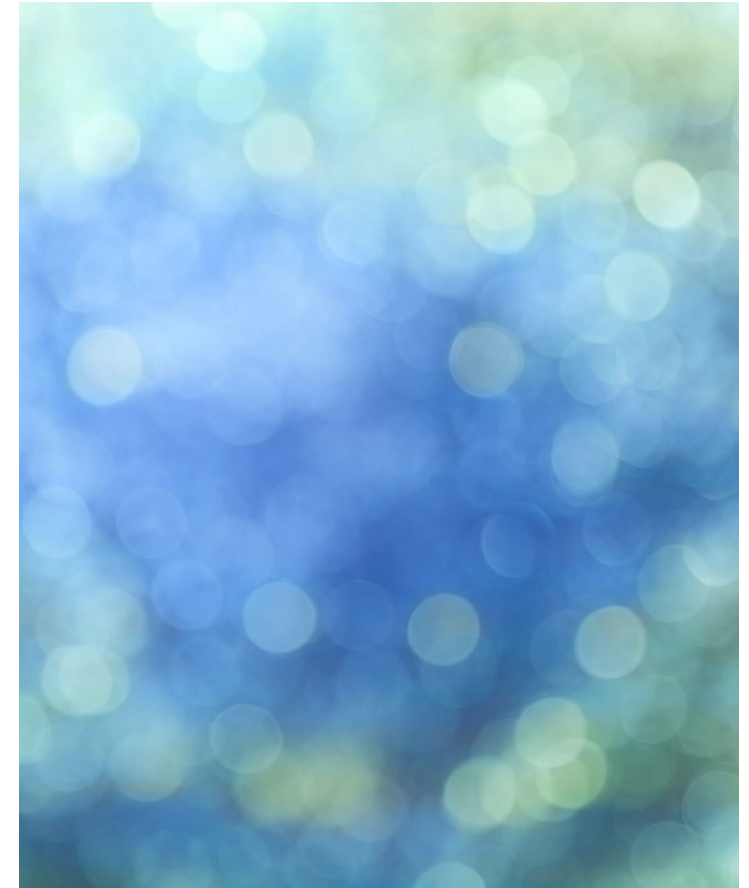
58,587 minutes saved

976.45 hours fewer hours of administrative time

Nearly 19 (18.78) hours per week added for clinical (or other) services

44.98% reduction in total assessments requiring completion

Providers: more time in clinical work;
Clients: less time on redundant questions



Conclusions



Added new, clinically relevant questions



Streamlined process of collection by creating a single form to be completed by all BHS services



Used data to develop new dashboards and create a composite metric to track system outcomes for BHS



Saved hundreds of hours by moving to a new, non-episodic process that is more efficient for providers and person-centered for clients

Next Steps – Not An Exhaustive List



Share results at All Provider meeting



Continue to build change over time SDOH composite metric into current and future dashboards



Continue to leverage SDOH data for other analyses (risk, value, predictive)



Utilize SDOH to determine success of referrals



Utilize SDOH data to determine future service investments and expansion opportunities

Many Thanks

- Implementation Team
 - Ann Hamachek
 - Ross Winklbauer
 - Gary Kraft
 - Matt Drymalski



CFI

CENTERS FOR INDEPENDENCE

8

NO TRAIN NO GAIN

SARAH HARKNESS AND TRICIA SCHOMMER

PRESENTED BY WHOLE HEALTH CLINICAL GROUP OF CFI

Aim Statement

DEVELOP A NEW AND IMPROVED MULTIFACETED TRAINING AND ONBOARDING PROCESS TO EMPOWER NEW HIRES TO PROSPER AND SUCCEED WITHIN THE AGENCY.

Pre-Survey

Current employees participated in a survey on our training and onboarding program

- 27 employees who have worked for WHCG from 6 months to several years participated
- On average they rated the quality of our training as a 3.59

Post-Survey

Current employees participated in a post survey and rated the quality of the new training and onboarding program

- 22 employees who have worked for WHCG from 6 months to several years participated
- On average they rated the quality of the program improvement as a 4.27

We asked how well they understood their job duties and what could have been communicated better AND what resources would have been beneficial

3 respondents (11%) answered **duties** for this question.

A word cloud visualization of responses to the question 'What could have been communicated better?' for the topic of 'duties'. The words are arranged in a roughly rectangular shape, with 'duties' being the largest and most central word. Other prominent words include 'work', 'clients', 'official duties', 'remote work', 'job duties', 'personal vehicle', 'paperwork', 'side of things', 'helpful', 'workload', 'salary', 'responsible', 'specific duties', 'case manager', 'office work', 'better description', 'deadlines and organization', 'provider connect', 'wage', and 'meaning and understanding'.

4 respondents (15%) answered **trainings** for this question.

A word cloud visualization of responses to the question 'What resources would have been beneficial?' for the topic of 'trainings'. The words are arranged in a roughly rectangular shape, with 'trainings' and 'teams' being the largest and most central words. Other prominent words include 'comprehensive training', 'step instructions', 'clients', 'subject matters', 'coworkers', 'phone numbers', 'cheat sheets', 'files/cheat', 'hands-on training', 'list of the medications', 'handbook or something similar', 'trainings with county CCS program', 'program resources', 'step by step', 'Avatar', 'care coordinators', and 'continuing ed'.

Pre-Survey

7. Did the training meet your expectations?

● Yes	16
● No	3
● Maybe	8



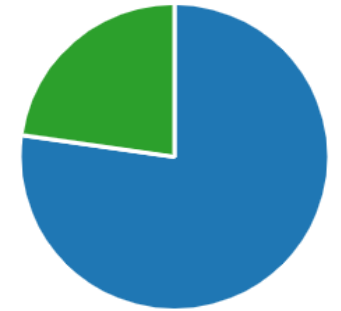
Post-Survey

4. Does the new training program meet your expectations?

[More Details](#)

[Insights](#)

● Yes	17
● No	0
● Maybe	5



We asked what would improve the training in our program:

These are the steps we took to improve the program:

“More shadowing experience/mentor type coworker to ask questions to. They generally feel more approachable and provide a lot of support.”

- Created a training program in three formats to meet staff needs; written, oral and visual.
- Created welcome videos to get to know the leadership team
- A Universal welcome packet including a get to know your peers and all policies and procedures
- Universal training checklists for leaders and new hires
- A supportive onboarding workflow for leadership and new hires
- One on one trainings
- Mentorship program

We asked the staff how satisfied they are with the overall changes made to the training program

● Very satisfied	11
● Somewhat satisfied	6
● Neither satisfied nor dissatisfied	5
● Somewhat dissatisfied	0
● Very dissatisfied	0



Next Steps:

- To review and make changes as needed
- An additional post survey in September

Niatx – Expanding Milwaukee Mobile Crisis Referral Sources & Community Presence

Hannah Lang & Michele LeCloux



Aim (Plan)

- Milwaukee Mobile Crisis will increase community presence (number of community mobiles) by increasing referral sources



Changes (Do)

Milwaukee Mobile Crisis has been adding several referral sources including:

- **Ch. 51.45** (West Allis PD and MCSO)
 - Starting on 7/26/2023
- **Mental Health Emergency Center (MHEC)**
 - Starting on 9/23/2023
- **Molina**
 - Starting on 9/25/2023
- **Adult Protective Services (APS)**
 - Starting on 11/20/2023



Changes (Do)

- MMC follows the typical workflow for processing new referrals (in accordance with DHS 34)
 - Assessment, stabilization, and linkage related to mental health and/or substance use concerns
- Referrals to MMC can result in the following:
 - Phone contact
 - Community mobiles
 - Post intervention follow up



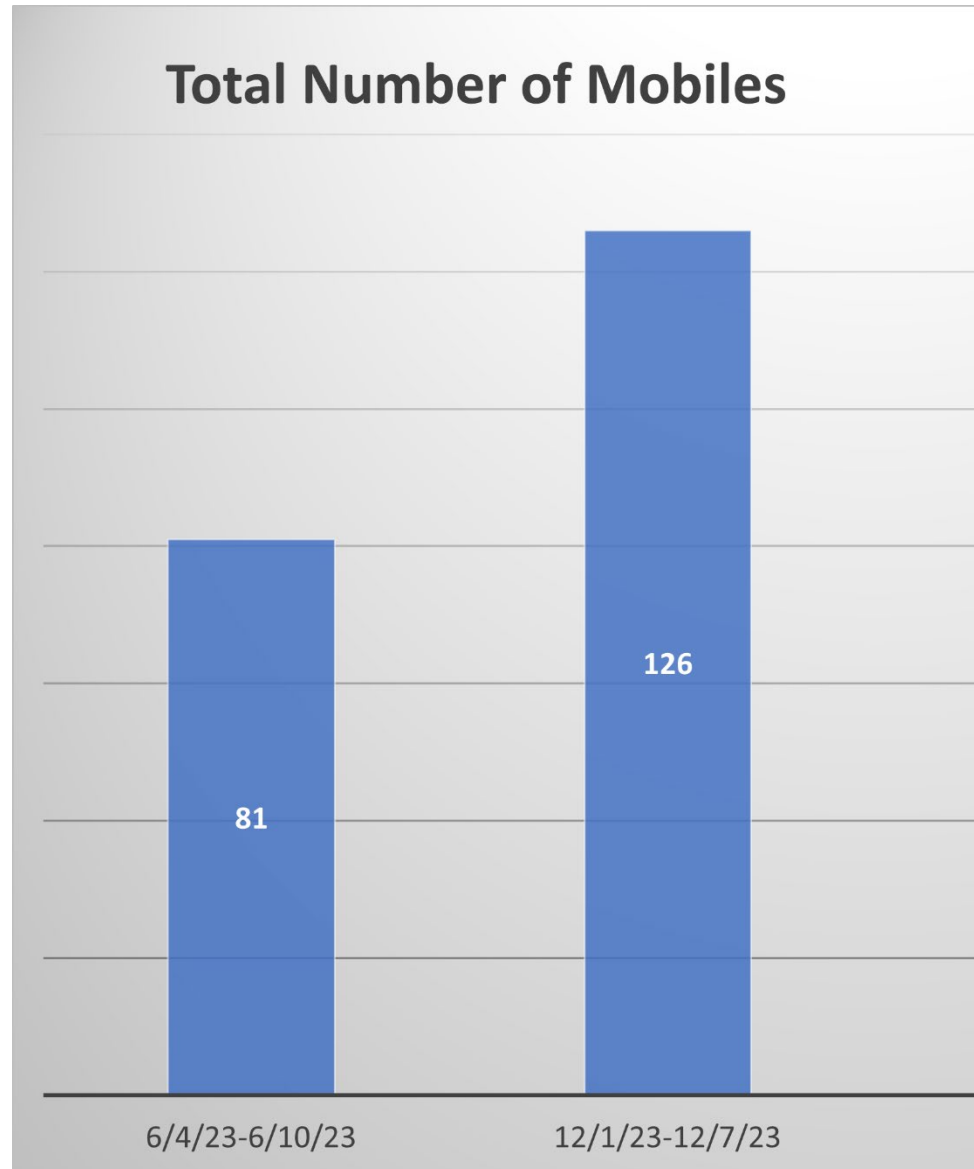
Changes (Do)

- MMC collected the total number of mobiles for one week in June of 2023 – Prior to the introduction of new referral sources
- MMC collected the total number of mobiles for one week in December of 2023 (6 months later) – After the integration of several new referral sources (Ch 51.45, MHEC, Molina, and APS referrals)



Results

Total Number of Mobiles



Next Steps (Act)

Adopt



Next Steps (Act)

- Milwaukee Mobile Crisis continues to receive and track these new referrals.
- MMC coordinators communicate with each of the respective referral sources to monitor and collaborate.
- The MMC assignments have been adjusted to accommodate this new workflow.

Milwaukee Mobile Crisis Referral Totals (as of 2/29/24)		
Referral Source	Start Date	Referrals
MHEC	9/23/2023	69
CH 51.45	7/26/2023	22
Molina	9/25/2023	79
APS	11/20/2023	55
Total Referrals		225



Impact

- Current barriers
 - Balancing new service requests with pre-existing roles and responsibilities
 - Reviewing how these impact availability and promptness for community responses
 - Coverage of the Crisis Stabilization Houses which currently requires 1-4 staff per day for oversight, assessment, admission/discharge, and RN duties
 - Plan for MMC to transition out of this role in 2024



Impact

- MMC has since added additional referral sources:
 - Milwaukee County Transit System, Youth Detention, and Community Crisis Plans
- Expanding and identifying role of multidisciplinary community crisis response
 - Expanding nursing (RN) staff availability and scope
 - Hiring and integrating Certified Peer Support specialists (CPS)



Questions?



**MILWAUKEE
COUNTY**



April 17, 2024

Broadstep Behavioral Health
Attn: Karl Rajani
1205 S. 70th St. Suite 202
West Allis, WI 53214

RE: Notice to Suspend Referrals

Dear Mr. Rajani,

Milwaukee County Department of Health and Human Services (DHHS) Contract Compliance is submitting this communication as notice that referrals to Broadstep Belwood Community Based Residential Facilities (CBRF) are being suspended as of this date. This action is being taken due to the concerns regarding deficiencies in standards and quality of care at the CBRF.

On March 18, 2024, DHHS completed an unannounced site visit of Broadstep. Several areas were out of compliance with DHS 83 and the agreement with DHHS. Deficiencies included dead mice throughout the facility, dirty client bedrooms, wet substances on floors, and feces near a bathroom entrance. DHHS also found six (6) staff had not been impaneled as required in DHHS Policy 800-004 – Staff Roster and Add-Delete Procedure. The severity of the environment findings led to reports being made to the State of Wisconsin Department of Health Services (DHS) and the City of Milwaukee Health Department.

On April 10, 2024, DHHS became aware that the State of Wisconsin Department of Health Services (DHS) completed a compliant investigation of Belwood on March 18, 2024, where deficiencies were identified. Broadstep leadership did not notify DHHS as required in DHHS Policy 005 Contractor/Provider Obligations. Per the policy, "Provider agrees to notify Purchaser within twenty-four (24) hours if Provider is under investigation by CMS, OIG, or any other government entity." Broadstep was made aware of this reporting requirement in July 2022 after not notifying DHHS of a DHS investigation. Due to these findings, DHHS will be imposing liquidated damages in the amount of \$150 per day for the period of time DHHS was not notified by Broadstep's leadership of the DHS investigation in the amount of \$3,450.

You may propose a repayment plan; or send a check in the amount of \$3,450 payable to the Milwaukee County Department of Health and Human Services to be received by DHHS no later than May 6, 2024.

Please be advised that Milwaukee County General Ordinance 46.09(4)(h) gives authority for DHHS to impose interest on outstanding repayments due to the County "upon demand for repayment by the county." Remit Payment to:





Milwaukee County Behavioral Health Services Fiscal Services
Attn: Greg Flegel
1220 W. Vliet Street
Milwaukee, WI 53205

We want to take this opportunity to emphasize the importance of adhering to the contractual requirements set forth in your FFSA with DHHS. If an infraction would occur again, we reserve the right to recoup funds accordingly.

Milwaukee County Behavioral Health Services leadership will be scheduling a meeting with Broadstep leadership to review these concerns and discuss next steps. Please be aware that as a contracted provider of services with Milwaukee County DHHS, the findings, corrections, and/or outcomes of quality and compliance audits will be reported to the Quality Committee of the Milwaukee County Mental Health Board and other applicable entities as required.

Thank you,

Lolita Williams
Director of Contract Compliance
Milwaukee County Department of Health and Human Services
9445 W. Watertown Plank Road Room 4302
Milwaukee, WI 53226
Ph: 414-257-8109

cc: M. Lappen, A. Lorenz, J. Wittwer, D. Buesing, L. Williams, G. Flegel, T. Layne, K. Rajani

**Milwaukee County Department of Health & Human Services (DHHS)
Corrective Action Plan (CAP)**

Tuesday March 5

Agency Name:	Matt Talbot Recovery Services	Phone:	414-240-6502
Address:	1205 S 70 th St, West Allis WI 53214	Fax:	414-635-2227
Contact Person:	Nicole Bligh	Email:	nicole@hhcppo.com

Please ensure all requested information is completed prior to signing and submitting. Submit completed document via email to BHSImpaneling@milwaukeecountywi.gov

All Direct Service Providers and applicable Agency Staff have received all applicable/cited Policies and Procedures in the CAP, have read, understand and have been instructed that they (Provider/Staff) must implement and abide by these Policies and Procedures.

*By signing this CAP, **Tiffany Sanchez, Executive Compliance Analyst**, attest that my signature below will act as personal confirmation that the stated corrective action plan will be implemented per the request and approval of Milwaukee County DHHS and enter your Service Area here*

Tiffany Sanchez, Executive Compliance Analyst	04/02/2024
Signature (typed signature is a valid signature on this document)	Date Signed

Milwaukee County Department of Health & Human Services (DHHS) Corrective Action Plan (CAP)

Updated _____

Finding #1	Expectation (Policy requirement)	Responsible Party(ies) (Name and title)	Corrective Action Steps (Include initials of responsible party for each step)	Measurable Outcomes	Target Timeline (Please list date for each step)
Agency allowed ineligible Provider to provide services	Per DHHS Policy Provider Obligations 005 U: Written notification of eligibility of new or replacement DSPs and Indirect Staff shall be made per Purchaser Policies and Procedures prior to the provision of Covered Services or having any other contact with Service Recipients or access to Service Recipients personal property.	Ann Fraizer Director of Training and Development Darrol Brown, NCI Instructor and Director of Matt Talbot-Franklin and Uncas Mira Watson (MW), HR Representative	Immediate Steps: <ul style="list-style-type: none"> - Review DHHS Policy 001 Caregiver Background Checks MW - Review DHHS Policy and Procedure Staff Roster and Add-Delete Procedure 800-004 MW - Review DHHS Policy Provider Obligations 005 MW - Policies can be found at the link below MW - Please include the date of completion MW 3/27/2024 - Watch the DHHS Staff Roster Training Video (Include the date of completion) MW 3/27/2024 - See link below for training. It can be found under DHHS Trainings/Presentations on the lower part of the page. It will be called "Training Video" <p style="text-align: center;">Provider Portal (milwaukee.gov)</p>	All staff will be approved before having contact with service recipients. We will get approval email from county. 100% staff approval All Staff responsible for Add Drop Process will review these policies and sign attestations documenting understanding	Implementation Date: March 27, 2024 4/2/2024 (completed see ATTACHED signed policies as we are unable to LOGIN to Policystat and unsure of how to complete attestations.
			Ongoing Steps: Matt Talbot will request all required information from the staff needed, review background checks, and submit staff who pass CBC and DOJ	All staff CBC DOJ will be reviewed by	Projected Completion Date: 4/2/2024 Ongoing

Milwaukee County Department of Health & Human Services (DHHS) Corrective Action Plan (CAP)

Updated _____

			<p>review by HR. HR will review all results and only submit employees who would be found eligible to provide services. If there are any concerns, HR will consult with Quality Assurance and or impaneling to as a “check and balance” to ensure compliance. HR will also ensure that staff are impaneled with the appropriate job title and credentials.</p>	<p>HR before submission to County Impaneling.</p>	
<p>DHHS office use only - Follow Up:</p>	<p><input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Further Action Needed</p>	<p>Note: Please continue to document the actions your agency took towards the finding and measurable outcome(s).</p>			

**Milwaukee County Department of Health & Human Services (DHHS)
Corrective Action Plan (CAP)**

Updated _____

Finding #2	Expectation (Policy requirement)	Responsible Part(ies) (Name and title)	Immediate Steps:	Measurable Outcomes	Target Timeline (Please list date for each step)
<p>Add Drop requests were submitted with missing Add Drop forms and incomplete CBCs</p>	<p>Per DHHS Policy Provider Obligations 005 U: Provider agrees to maintain a current roster of eligible DSPs and Indirect staff and to notify Purchaser within 5 business days after a DSP is no longer providing covered services (V.) If DSP or Indirect Staff leaves or is let go from their position serving Milwaukee County clients for any reason connected to services covered in the Contract/Agreement, Purchaser must be notified in writing within two (2) business days if the staff member has access to the Electronic Health Record</p>	<p>Mira Watson, HR Representative</p> <p>Ann Fraizer Director of Training and Development</p>	<ul style="list-style-type: none"> - Review DHHS Policy 001 Caregiver Background Checks MW 4/2/24 - Review DHHS Policy and Procedure Staff Roster and Add-Delete Procedure 800-004 MW 4/2/24 - Review DHHS Policy Provider Obligations 005 MW 4/2/24 - Policies can be found at the link below - Please include the date of completion - Watch the DHHS Staff Roster Training Video (Include the date of completion) MW 4/2/24 - See link below for training. It can be found under DHHS Trainings/Presentations on the lower part of the page. It will be called "Training Video" <p align="center">Provider Portal (milwaukee.gov)</p>	<p>All staff will be dropped, and roster will be maintained. Each time someone is terminated, quits or removed from our "internal roster" – Matt Talbot will also submit a drop request to BHS.</p> <p>When individuals are transferred they will be approved in the correct program</p>	<p>Implementation Date:</p> <p>March 27, 2024</p> <p>We are in the process of cleaning up rosters with impaneling.</p>

**Milwaukee County Department of Health & Human Services (DHHS)
Corrective Action Plan (CAP)**

Updated _____

	<p>(EHR) and/or Protected Health Information (PHI) as specified under HIPAA, ... (AA.)”.</p> <p>DHHS Policy 001 Caregiver Background Checks H: Provider agrees to abide by the terms of chapters 48 and 50 Wisconsin statutes requiring Background Checks on all caregivers as set forth in Section Twenty-three.</p> <p>Within 90 days prior to the provision of services, agencies shall conduct Background Checks at their own expense on all applicable staff/DSP's/Indirect Staff.</p>	<p>Mira Watson, HR Represent ative</p>	<p>Ongoing Steps:</p> <p>We will be working impaneling to ensure our roster is current. We actually have a meeting setup for 3/29/24</p> <p>We will drop staff within 5 business days of termination of employment.</p>	<p>through county. Each time someone is transferred on our “internal roster”- a change request will be submitted by Matt Talbot to BHS.</p> <p>100% Roster Compliance</p> <p>Having up-to-date roster</p> <p>100% compliance with updated roster</p>	<p>Projected Completion Date:</p> <p>April 12, 2024</p> <p>Ongoing</p>
<p>DHHS office use only - Follow Up:</p>	<p><input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Further Action Needed</p>	<p>Note: Please continue to document the actions your agency took towards the finding and measurable outcome(s).</p>			

Chairperson: Richard Canter
Research Analyst: Kate Flynn Post, (414) 257-7473
Interim Committee Coordinator: Jennifer Miles, (414) 257-7639

**MILWAUKEE COUNTY MENTAL HEALTH BOARD
FINANCE COMMITTEE BUDGET MEETING**

Thursday, June 6, 2024 - 4:30 P.M.
Washington Park Senior Center

MINUTES

PRESENT: Richard Canter, Jon Lehrmann, Mary Neubauer, Kathie Eilers (virtual)
EXCUSED: Dennise Lavrenz

SCHEDULED ITEMS:

- | | |
|----|--|
| 1. | <p>Welcome.</p> <p>Chairman Canter welcomed everyone to the June 6, 2024, Mental Health Board Finance Committee’s hybrid Budget meeting.</p> |
| 2. | <p>2024 Budget Preliminary Overview.</p> <p>The County-wide budget gap for 2025 is \$11.5 million projected in a 5-year forecast. Behavioral Health Services (BHS) has been given a flat tax levy target. Investments in improvement of access to services (e.g. making services easier to access, decreasing wait times, etc); Investments in the health of our contracted provider network (e.g. raising rates, providing training or other supports); Funding sources that would allow for sustainability of prevention programs funded by ARPA, expansion of other prevention programs; and staff supports, were all identified as points of emphasis for the budget this year; based on feedback heard from the public, BHS’ own strategic vision, and direction from the Mental Health Board.</p> <p>Budget initiatives for 2025 include: \$1.0m to support independent living pilot project to serve as step-down level of care for individuals currently living in group homes; 5% rate increase for Comprehensive Community Service providers; \$0.3m increase for Community-Based Residential Facility Rates; 5.0 FTE new paid intern positions; Wraparound funding model shift towards Comprehensive Community Services and Crisis Intervention; continued Opioid Settlement Fund Intervention and Prevention services; and continued funding for the Community and Family Resource Liaison to help family members and others advocate for mental health services.</p> <p>Public input is key to the budget process. On March 21, 2024, the Board held a budget hearing with public comment to help establish funding priorities for 2025. The Department of Health and Human Services (DHHS) created a budget balancing tool to help identify funding priorities among internal stakeholders and frontline staff. A survey will be available for all staff to communicate priority recommendations for the 2025 Budget.</p> |

Next steps in BHS' budget process include releasing the 2025 Budget Narrative for the June 11, 2024, Finance Budget Public Hearing; budget amendments or suggestions are due from the Board and public by June 24, 2024; the Finance Committee will meet on June 27, 2024, to discuss and make a recommendation on the Budget and any amendments; and the Board will meet on July 11, 2024, to approve the final Budget for submission to the County Executive. Of those dates, the opportunity for additional public feedback on the 2025 Budget will take place at the June 11, 2024, and June 27, 2024, Finance Committee meetings.

Questions and comments ensued.

This Item was informational.

3. **Adjournment.**

Chairman Canter ordered the meeting adjourned.

This meeting was recorded. The official copy of these minutes and subject reports, along with the audio recording of this meeting, is available on Milwaukee County's Legislative Information Center website, which can be accessed by clicking the link below.

Length of meeting: 4:35 p.m. to 4:50 p.m.

Adjourned,

Jennifer Miles

Jennifer Miles
Interim Committee Coordinator
Milwaukee County Mental Health Board

The next meeting of the Milwaukee County Mental Health Board's Finance Committee will be a Public Hearing on Tuesday, June 11, 2024, at 4:30 p.m.

**TOPIC: 2025 Budget Narrative
PUBLIC COMMENT WILL BE HEARD ON
THE 2025 BUDGET**

**To View All Associated Meeting Materials,
Visit the Milwaukee County Legislative Information Center at:
[Milwaukee County - Calendar \(legistar.com\)](https://legistar.com)**

**Visit the Milwaukee County Mental Health Board Web Page at:
<https://county.milwaukee.gov/EN/DHHS/About/Governance>**



MILWAUKEE COUNTY
**DEPARTMENT OF
HEALTH & HUMAN
SERVICES**

2025 Behavioral Health Services Budget

Preliminary Presentation

June 6, 2024

2025 Milwaukee County Budget Outlook

- \$11.5m countywide budget gap projected in 5-year forecast
- Flat tax levy targets for 2025 requested budget
- The 0.4% sales tax increase has provided additional revenue for Milwaukee County to offset previously unfunded pension obligations, but the County's expenditures continue to grow faster than revenues.
- Budget gaps expected to continue in future years.



2025 Budget Points of Emphasis

- **Access** – Investments in improvement of access to services (e.g. making services easier to access, decreasing wait times, etc)
- **Provider Network** – Investments in the health of our contracted provider network (e.g. raising rates, providing training or other supports)
- **Sustaining and Expanding Prevention** – Funding sources that would allow for sustainability of prevention programs funded by ARPA, expansion of other prevention programs
- **Staff Supports** – Funding to support staff through change, training and development, and continued emphasis on Racial Equity



2025 BHS Budget Challenges

- **\$3.4m revenue decrease** across all BHS services due to decline in Medicaid enrollment
- Flat Tax Levy target
- Continued challenges with inflation impacting provider rates. The 2025 budget addresses some of these issues, but this will remain a major financial challenge in 2025.



2025 BHS Budget Initiatives

- **\$1.0m** to support independent living pilot project to serve as step-down level of care for individuals currently living in group homes
- **5%** rate increase for Comprehensive Community Service providers
- **\$0.3m** increase for Community-Based Residential Facility Rates
- **5.0 FTE** new paid intern positions
- Wraparound funding model shifted towards **Comprehensive Community Services** and **Crisis Intervention**.
- Continued **Opioid Settlement Fund** Intervention and Prevention services
- Continued funding for the Community and Family Resource Liaison to help family members and others advocate for mental health services.



Public & Stakeholder Feedback

- The Mental Health Board held a public input meeting in March. This meeting helped establish funding priorities for 2025.
- DHHS Budget Staff Survey in early June 2024 to help identify funding priorities among internal stakeholders and frontline staff. The survey is available for all staff to respond what they feel should be a priority in the 2025 budget.
- Another opportunity for public feedback on the 2025 budget will take place at the June 27th Finance Committee meeting at



2025 Budget: Next Steps

- 2025 budget narrative will be released in mid-June on the MCMHB website.
- Budget amendments or suggestions are due on **Monday, June 24th**. More information on how to submit amendment requests will be provided at the **June 11th** meeting.
- 2025 Budget process includes new form to request projects outside of the budget target to be considered in the County Executive's budget recommendation
- Finance Committee will meet **June 27th** to discuss and vote on the budget and any budget amendments.
- The full board will meet on **July 11th** to approve final budget for County Executive.





**MILWAUKEE
COUNTY**

Chairperson: Richard Canter
Research Analyst: Kate Flynn Post, (414) 257-7473
Interim Committee Coordinator: Jennifer Miles, (414) 257-7639

**MILWAUKEE COUNTY MENTAL HEALTH BOARD
FINANCE COMMITTEE**

Thursday, June 20, 2024 – 8:00 A.M.
Marcia Coggs, 1220 W Vliet St, Conf Rm 101

A G E N D A

SCHEDULED ITEMS:

1.	Welcome. (Chairman Canter)
2.	Minutes from April 25, 2024, Committee Meeting. (Informational)
3.	Employment Agreement. (Dr. John Schneider, Behavioral Health Services/Recommendation Item)
4.	Purchase-of-Service Agreements Recommendation. (Amy Lorenz and Matt Fortman, Behavioral Health Services/Recommendation Item) <ul style="list-style-type: none">• Agreement Amendment(s)
5.	Fee-for-Service Agreements Recommendation. (Amy Lorenz and Matt Fortman, Behavioral Health Services/Recommendation Item) <ul style="list-style-type: none">• 2024 Agreement(s)
6.	Community Contract Vendor Quality Updates: Sanctions, Holds, and Service Suspensions. (Dennis Buesing, BHS Contract Administrator/Informational) <ul style="list-style-type: none">• Safe and Sound Contract Termination
7.	Adjournment.

**The next regular meeting of the Milwaukee County Mental Health Board's
Finance Committee is Thursday, August 22, 2024, at 8:00 a.m.
Location: TBD**

Dial in by phone
1(414) 436-3530 United States, Milwaukee
Phone conference ID: **669 341 342#**

To View All Associated Meeting Materials,
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Visit the Milwaukee County Mental Health Board Web Page at:
<https://county.milwaukee.gov/EN/DHHS/About/Governance>

ADA accommodation requests should be filed with the Milwaukee County Office for Persons with Disabilities, 278-3932 (voice) or 711 (TRS), upon receipt of this notice.

Chairperson: Richard Canter
Research Analyst: Kate Flynn Post, (414) 257-7473
Interim Board Liaison: Jennifer Miles, (414) 257-7639

**MILWAUKEE COUNTY MENTAL HEALTH BOARD
FINANCE COMMITTEE**

Thursday, April 25, 2024 - 8:00 A.M.
**Marcia P. Cogs Human Services Building
1220 West Vliet Street, Room 104**

MINUTES

PRESENT: Richard Canter, *Dennise Lavrenz, Jon Lehrmann
EXCUSED: Kathie Eilers, Mary Neubauer
*Lavrenz arrived at the beginning of Item 5

SCHEDULED ITEMS:

NOTE: All Informational Items are Informational Only Unless Otherwise Directed by the Committee.

1. **Welcome.**
Chairman Canter welcomed everyone to the April 25, 2024, Mental Health Board Finance Committee’s meeting.

2. **Minutes from the March 28, 2024, Committee Meeting.**

The minutes were reviewed, acknowledged, and accepted by the Committee.

This Item was informational.

3. **Professional Services Contracts Recommendation.**

Contract Amendment(s)
➤ Goodwill Industries of Southeast Wisconsin
➤ Medical College of Wisconsin Affiliated Hospitals, Inc.
➤ Status Solutions, LLC

Professional Services Contracts focus on community-based programming, supports functions critical to client care, and are necessary to maintain crisis and community services licensure. An overview was presented of all the services provided.

Questions about the pendant alarms were asked to clarify whether this is an agreement for the current building, the future DHHS building, or both. It was confirmed that this is the same type of device that was used successfully at the Behavioral Health Services Hospital and will be used in both the current DHHS building and the future building.

SCHEDULED ITEMS (CONTINUED):

	<p>Goodwill Industries of Southeast Wisconsin and Status Solutions, LLC were voted upon by the Committee and then Medical College of Wisconsin Affiliated Hospitals, Inc. was voted upon separately to accommodate Dr. Lehrmann’s conflict.</p> <p>The Finance Committee unanimously agreed to recommend approval of the three Professional Services Contracts and Amendment to the Board as delineated in the corresponding report.</p>
4.	<p>Purchase-of-Service Agreements Recommendation.</p> <ul style="list-style-type: none">• Agreement Amendment(s)• 2024 Agreement(s) <p>Purchase-of-Service Agreements are for the provision of adult and child mental health services and substance use disorder services. An overview was provided detailing the service agreements.</p> <p>No questions were asked about these agreements.</p> <p>The Finance Committee unanimously agreed to recommend approval of the Purchase-of-Service Agreements to the Board as delineated in the corresponding report.</p>
5.	<p>Finance Committee Fee-for-Service Agreements Recommendation.</p> <ul style="list-style-type: none">• 2024 Agreement(s) <p>Fee-for-Service Agreements are for the provision of adult and child mental health services and substance use disorder services. An overview was provided detailing the program agreements, which provide a broad range of support services for adults and children with serious emotional disturbances and their families.</p> <p>Questions clarifying Youth Crisis Stabilization Facility (YCSF) in Milwaukee in comparison to this proposal in Jefferson County were asked. It was explained that the YCSF operated in Milwaukee was closed for poor utilization; however, the partnership with Jefferson County offers Milwaukee County an opportunity to utilize in emergency situations instead of placement at a residential facility, at a lower cost. The partnership with Jefferson County means that it will be paid per use only and not the full cost to operate the facility.</p> <p>The Finance Committee unanimously agreed to recommend approval of the Fee-for-Service Agreements to the Board as delineated in the corresponding report.</p>
6.	<p>Employment Agreement.</p>

SCHEDULED ITEMS (CONTINUED):

	<p>Dr. Schneider informed the Board that there is a candidate identified and this employment agreement is being submitted with the intent to hire.</p> <p>The Finance Committee unanimously agreed to recommend approval of the Employment Agreement to the Board as delineated in the corresponding report.</p>
7.	<p>Receipt of Revenue.</p> <p>Funds accepted would be used to support ongoing expenses for individuals with opioid use disorders in residential settings. The room and board portion, or care management portion, is normally funded by Medicaid. This, however, is a state grant received for a couple of years now, but very little tax levy will be needed to cover the difference.</p> <p>Questions and comments ensued.</p> <p>The Finance Committee unanimously agreed to recommend the Mental Health Board approve acceptance of the Receipt of Revenue.</p>
8.	<p>Expected Enrollment Changes for Children’s Services with HMO Transition.</p> <p>This is a memo that was provided to Care Coordination service providers in the Wraparound Milwaukee Provider Network to inform of timelines for each agency’s transition from youth enrolled in HMO programming to the Crisis Care Coordination model and/or CCS programming. This memo was added to the Finance Committee’s agenda to provide an update on this transition in programming.</p> <p>This Item was Informational.</p>
9.	<p>Adjournment.</p> <p>Chairman Canter ordered the meeting adjourned.</p>

This meeting was not recorded due to technical difficulties. The official copy of these minutes and subject reports are available on Milwaukee County’s Legislative Information Center website, which can be accessed by clicking the link below.

Length of meeting: 8:03 a.m. to 8:29 a.m.

Adjourned,

Jennifer Miles

Jennifer Miles
Interim Board Administrative Liaison
Milwaukee County Mental Health Board

SCHEDULED ITEMS (CONTINUED):

**The next meeting of the Milwaukee County Mental Health Board
Finance Committee is Thursday, June 6, 2024, at 4:30 p.m.**

**Washington Park Senior Center
4420 West Vliet Street
Milwaukee, WI 53208**

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COUNTY OF MILWAUKEE
Behavioral Health Services Administration
Inter-Office Communication

DATE: May 28, 2024

TO: Mary Neubauer, MSW, CPS, Chairperson, Milwaukee County Mental Health Board

FROM: Michael Lappen, BHS Administrator
Submitted by John Schneider, MD, FAPA, BHS Chief Medical Officer

SUBJECT: **Report from Behavioral Health Services Administrator, Requesting Approval to Implement one new “Employment Agreement” As Established Under BHS Personnel Policy for Specific Classified, Unclassified and Exempt Physician, Psychologist and Advanced Practice Nurse County Employees**

Issue

Wisconsin Statute 51.41(10) requires approval for any contract related to mental health with a value of at least \$100,000. No such contract or contract amendment shall take effect until approved by the Milwaukee County Mental Health Board.

Per the above Statute, the BHS Administrator is requesting authorization to establish one (1) new Employment Agreement with a position for which we are currently recruiting.

Discussion

Due to the significant time, effort and expense associated with recruiting and retaining qualified medical staff, Behavioral Health Services, in collaboration with the Compensation Division and Corporation Counsel, has established a personnel policy that allows for employment agreements for specific classified, unclassified and exempt physician, psychologist and advanced practice nurse classifications within Milwaukee County employ. The purpose of these agreements is to stipulate total compensation including fringe benefits, recruitment/retention incentives and to establish a reasonable and fair “minimum resignation notice” requirement, which does not exist under Civil Service rules.

We submit the table below, which lists the personnel transaction that BHS will be requesting the Milwaukee County Chief Human Resources Officer to implement, in connection with Employment Agreement execution.

NEW AGREEMENT - RECRUITMENT									
ITEM ID	HIGH/ LOW ORG	NO. POSITIONS	RECOMMENDED		INFORMATIONAL: Market equitable alignment based on overall job duties/responsibilities, industry competition, competencies and education/experience requirements.	EFFECTIVE DATE (on or after)			
			PAY RANGE	ANNUAL PAY RATE					
EA2024-6A	6300/ 6405	1	P027	Min	197,891	X	Immediate Recruitment Need.	07/07/2024	
				Max	298,272	X			Retention
				Offer Not to Exceed \$285,800 *		X			Industry shortage / high competition for profession
									Other:
<p>The individual practitioner(s) entering into this agreement shall maintain current status as a benefit-eligible COUNTY EMPLOYEE, or if newly hired shall be established as a benefit-eligible COUNTY EMPLOYEE, including ERS or WRS enrollment, as applicable, and subject to all applicable Milwaukee County and BHS personnel policies and Civil Service rules, where applicable.</p> <p>Based on industry shortage and high competition, a recruitment/retention bonus may also be offered in some instances. All bonuses awarded shall be subject to conditions. Amount of bonus for above position(s), if determined to be eligible, shall not exceed \$25,000 annually.</p> <p>*The recommended and offered salary shall be equitable to what other BHS employees with similar post-graduate training experience are earning. If practitioner accepts part-time employment, recommended annual pay rate and bonus shall be pro-rated based on the assigned part-time FTE.</p> <p>In all cases, any funds identified through the Employment Agreement as a retention or other bonus shall not be considered eligible earnings under the Milwaukee County or State Pension Plans. Therefore, a retention or other bonus shall not affect in any manner any pension benefit under the Employee Retirement System (ERS) or Wisconsin Retirement System (WRS), including, but not limited to, earnable compensation, final average salary, service credit, eligibility for a benefit or timing of a benefit. Paid Extra Shifts may be authorized to salaried employees at Administration’s discretion when a critical patient care need exists.</p>									

Recommendation

It is recommended that the Milwaukee County Mental Health Board approve entering into an "Employment Agreement" (contract) with the candidate(s) selected for the vacant position(s) within the recommended total compensation amounts.

References

Wis. Stats. [46.19\(4\)](#): the salaries of any superintendent of a mental health institution and the salaries of any visiting physician and necessary additional officers and employees whose duties are related to mental health shall be fixed by the county executive.

Wis. Stats. [51.41\(10\)](#): MENTAL HEALTH CONTRACTS. Any contract related to mental health with a value of at least \$100,000, to which Milwaukee County is a party may take effect only if the Milwaukee County mental health board votes to approve, or does not vote to reject, the contract.

Wis. Stats. [51.42\(6m\)\(i\)](#): Establish salaries and personnel policies of the programs of the county department of community programs subject to approval of the county executive or county administrator and county board of supervisors, except in Milwaukee County, or the Milwaukee County mental health board in Milwaukee County unless the county board of supervisors or the Milwaukee County mental health board elects not to review the salaries and personnel policies.

Fiscal Effect

The recommended compensation contained in this report is supported by currently funded and authorized positions within Behavioral Health Services' 2024 operating budget. There is no tax levy associated with this request.

Respectfully Submitted,



Michael Lappen, Administrator
Behavioral Health Services

cc Richard Canter, JD, Chairperson, Milwaukee County Mental Health Board Finance Committee
Shakita LaGrant-McClain, Director, Department of Health and Human Services
John Schneider, MD, BHS Chief Medical Officer
Matthew Fortman, DHHS/BHS Fiscal Administrator
Pam Matthews, DHHS/BHS Sr. Budget Analyst
Lora Dooley, BHS Director of Medical Staff Services
Jennifer Miles, BHS Office Manager / Interim MHB Committee Coordinator

COUNTY OF MILWAUKEE
Behavioral Health Services Administration
Inter-Office Communication

DATE: May 28, 2024

TO: Mary Neubauer, Chairperson – Milwaukee County Mental Health Board

FROM: Shakita LaGrant-McClain, Director, Department of Health and Human Services
Approved by Michael Lappen, Administrator, Behavioral Health Services

SUBJECT: **Report from the Director, Department of Health and Human Services, Requesting Authorization to Execute 2024 Purchase of Service Agreements**

Issue

Wisconsin Statute 51.41(10) requires approval for any contract related to mental health (substance use disorder) with a value of at least \$100,000. No contract or contract adjustment shall take effect until approved by the Milwaukee County Mental Health Board. Per the statute, the Director of the Department of Health and Human Services (DHHS) is requesting authorization for the BHS Children’s Community Mental Health Services & Wraparound Milwaukee, and the Community Access to Recovery Services (CARS) Networks to execute mental health and substance use contracts.

Background

Approval of the recommended contract allocation will allow BHS to provide a broad range of rehabilitation and support services to adults with mental health and/or substance use disorders and children with serious emotional disturbances.

2024 Contract for Adult Services

Vivent Health, Inc. - \$85,246 *

At the April 27, 2023, meeting of the Milwaukee County Mental Health Board, the Board approved BHS to enter into a POS contract with Vivent Health, Inc. in the amount of \$124,597 for the Harm Reduction Vending Machine project, funded by Opioid Settlement Funds. At the August 24, 2023, MHB meeting the Board approved an amendment to the original contract for an additional \$114,393 bringing the contract total to \$238,990. This amendment was for additional harm reduction supplies and funded by State Opioid Response (SOR) and Substance Abuse Prevention and Treatment Block Grant (Supplemental). BHS will continue to contract with Vivent Health, Inc. to provide daily management of the Milwaukee County harm reduction vending machines, order all harm reduction supplies, and operate an Online Depot to Milwaukee County residents. BHS is requesting the Board to approve an additional \$85,246 of Opioid Settlement Funds to be added to this contract to bring the total 2024 contract to \$324,236.

Vin Baker Recovery LLC - \$500,000 *

At the December 14, 2023, meeting of the Milwaukee County Mental Health Board, the Board approved BHS to enter into a POS contract with Premier Care of Wisconsin, LLC, DBA Community Medical Services (CMS) in the amount of \$276,511 for Mobile Medication Assisted Treatment (MAT). Since approval by the board, CMS has not been able to receive approval from the State Opioid Treatment Authority (SOTA) and all requirements needed to begin mobile MAT services in Milwaukee County. Due to this, BHS ended the contract with CMS effective May 14, 2024. BHS will now use the remaining Congressional Directive on Spending (CDS) funds to contract with Vin Baker Recovery LLC for mobile MAT services to include the purchase of the mobile unit, IT equipment, medication pump, shore power, and sales tax to get the unit registered in the state of Wisconsin, resulting in a total contract for 2024 of \$500,000. Contract will be back dated to 6/1/2024 (6/1/2024-9/29/2024) as all CDS funds need to be spent by 9/29/2024. This request is for a single-sourced contract as the grant requirement to have all funds spent by 9/29/2024 makes it impractical to RFP for the service with the short amount of time remaining. Additionally, it should be noted that the only other known mobile MAT services in Milwaukee County is being completed by the Milwaukee County Office of Emergency Management (OEM), and BHS has also funded these MAT efforts in the amount of \$1,260,712 from 2023 to 2024 as approved by the MHB on December 14, 2023, with the same CDS funds.

La Causa, Inc. - \$ 350,000

BHS leadership is requesting a contract for La Causa, Inc. to resume providing crisis mobile services on third shift. La Causa provided these services for nine years from 2014 to 2023. During the COVID-19 pandemic these services were suspended to decrease the spread of and exposure to COVID-19 (majority of mobiles completed on third shift were in hospital emergency rooms). Resuming the services in late 2022 and 2023 was difficult due to workforce challenges and the contract was terminated at the request of La Causa. BHS let a request for proposal this year, and La Causa submitted a proposal to resume completing crisis mobile services on third shift (2400 to 0730). Due to this, La Causa has been selected for the contract. The requested funding will result in a contract in the amount of \$350,000 for 2024.

Vivent Health, Inc. - \$184,794 *

At the December 14, 2023, meeting of the Milwaukee County Mental Health Board, the Board approved BHS to enter into a POS contract with Vivent Health, Inc. in the amount of \$101,339 for harm reduction supplies, funded by the Congressionally Directed Spending - Mobile Medication Assisted Treatment grant. At the February 22, 2024, MHB meeting the Board approved an amendment to the original contract for an additional \$34,750 and at the April 25, 2024 MHB meeting the Board approved an amendment for an additional \$26,798 bringing the contract total to \$162,887. This amendment was for additional harm reduction supplies and funded by State Opioid Response (SOR) and TANF. BHS will continue to contract with Vivent Health, Inc. to provide harm reduction supply purchases. BHS is requesting the Board to approve an additional \$187,794 of Congressionally Directed Spending - Mobile Medication Assisted Treatment grant funds to be added to this contract to bring the total 2024 contract to \$350,681.

2024 Contract for Childrens Services

St. Charles Youth & Family Services - \$292,445

CONTRACT AMENDMENT: adding funds to 2022 POS contract (BHS-POS269-032022) effective dates 5/1/2024-12/31/2024.

Vendor to provide day to day oversight of Owen's Place (southside) while ensuring availability of resources and opportunities to support young adults transitioning to adulthood. These services should engage and empower young adults to actively plan for adulthood. Owens Place provides a welcoming environment which young adults will find inviting and therefore attend regularly. This work focuses on establishing strong positive relationships with young adults and facilitating their search for information that supports their transition including the critical domains of functioning: working, living, learning, belonging, healing, and safety. The existing St. Charles purchase of service contract is for \$426,779.99 and this additional funding would bring the total 2024 contract of \$719,224.99.

Wisconsin Community Services, Inc. - \$404,500

Wraparound Milwaukee-Childrens Community Mental Health will have a single source contract starting June 1, 2024 with Wisconsin Community Services (WCS) to pilot a placement coordination team. This team will work with Wraparound Milwaukee and Children, Youth, and Family Services (CYFS) to facilitate all aspects of services for youth in out of home care. These services include day to day monitoring, securing new placement options, crisis response and support and be the linkage from placement vendor to HSW. This pilot program is needed given the Wraparound Milwaukee HMO funding changes. Funding for this pilot is until 12/31/24 and CYFS will fund this beginning in January of 2025. Based off the lessons learned in this pilot a future RFP may occur in 2025.

Fiscal Summary

The amount of spending requested in this report is summarized in the table below:

Vendor/Agency Name	Currently Approved Allocation	Contract Change Requested Amount	2023 Allocation	Proposed 2024 Allocation	2023/2024 Variance
La Causa	\$0	\$350,000.00	\$0	\$350,000.00	\$350,000.00
Vivent Health Inc.*	\$238,990.00	\$85,246.00	\$238,990.00	\$324,236.00	\$85,246.00
Vivent Health Inc.*	\$162,887.00	\$187,794.00	\$0	\$350,681.00	\$350,681.00
Vin Baker Recovery, LLC*	\$0	\$500,000.00	\$0	\$500,000.00	\$500,000.00
St. Charles Youth and Family Services, Inc.*	\$426,779.99	\$292,445.00	\$426,779.99	\$719,224.99	\$292,445.00
Wisconsin Community Services, Inc.	\$0	\$404,500.00	\$0	\$404,500.00	\$404,500.00
Total	\$828,656.99	\$1,819,985.00	\$665,769.99	\$2,648,641.99	\$1,982,872.00

*Represents an agreement with at least partial grant funding.



Shakita LaGrant-McClain, Director
Department of Health and Human Services

Cc: Richard Canter, Finance Chairperson

COUNTY OF MILWAUKEE
Behavioral Health Services Administration
Inter-Office Communication

DATE: May 28, 2024

TO: Mary Neubauer, Chairperson – Milwaukee County Mental Health Board

FROM: Shakita LaGrant-McClain, Director, Department of Health and Human Services
Approved by Michael Lappen, Administrator, Behavioral Health Services

SUBJECT: **Report from the Director, Department of Health and Human Services, Requesting Authorization to Execute 2024 Fee-for-Service Agreements**

Issue

Wisconsin Statute 51.41(10) requires approval for any contract related to mental health (substance use disorder) with a value of at least \$100,000. No contract or contract adjustment shall take effect until approved by the Milwaukee County Mental Health Board. Per the statute, the Director of the Department of Health and Human Services (DHHS) is requesting authorization for the BHS Children’s Community Mental Health Services & Wraparound Milwaukee, and the Community Access to Recovery Services (CARS) Networks to execute mental health and substance use contracts.

Background

Approval of the recommended contract allocations will allow BHS to provide a broad range of rehabilitation and support services to adults with mental health and/or substance use disorders and children with serious emotional disturbances.

2024 Contract for Adult Services

Kennedy’s Circle of Wellness - \$31,680*

CONTRACT AMENDMENT adding funds to 2024 - 2025 Fee For Service Agreement for Behavioral Health/Social Services. Vendor will provide Substance Use Disorder services to BHS CARS clients. The existing FFS contract with this vendor is for \$93,851.58 and this additional funding would bring the total contract amount to \$125,531.58.

House of Jacob LLC- \$200,000

CONTRACT AMENDMENT adding funds to 2024 - 2025 Fee For Service Agreement for Behavioral Health/Social Services. Vendor will provide Adult Family Home Services to BHS CARS clients. The existing FFS contract with this vendor is for \$90,000 and this additional funding would bring the total contract amount to \$290,000.

Brighter Dayz Treatment Center- \$270,000

CONTRACT AMENDMENT adding funds to 2024 - 2025 Fee For Service Agreement for Behavioral Health/Social Services. Vendor will provide Adult Family Home Services to BHS CARS clients. The existing FFS contract with this vendor is for \$147,996.57 and this additional funding would bring the total contract amount to \$417,996.57.

East Point Residential Facility, LLC- \$475,000

CONTRACT AMENDMENT adding funds to 2024 - 2025 Fee For Service Agreement for Behavioral Health/Social Services. Vendor will provide Adult Family Home Services to BHS CARS clients. The existing FFS contract with this vendor is for \$162,067.40 and this additional funding would bring the total contract amount to \$637,067.40.

2024 Contract for Childrens Services

Jewish Family Services, Inc. - \$200,000 (initial contract amount of \$105,000)

CONTRACT AMENDMENT adding funds to FFS contract effective dates 1/1/2024 to 12/31/2025. Vendor provides Comprehensive Community Services for Children. The existing contract amount is \$105,000 for a new total contract amount of \$200,000.

Fiscal Summary

The amount of spending requested in this report is summarized in the table below:

Vendor/Agency Name	Currently Approved Allocation	Contract Change Requested Amount	2023 Allocation	Proposed 2024 Allocation	2023/2024 Variance
Kennedy’s Circle of Wellness*	\$93,851.58	\$31,680.00	\$0.00	\$125,531.58	\$125,531.58
House of Jacob LLC	\$90,000.00	\$200,000.00	\$0.00	\$290,000.00	\$290,000.00
Brighter Dayz Treatment Center	\$147,996.57	\$270,000.00	\$0.00	\$417,996.57	\$417,996.57
East Point Residential Facility, LLC	\$162,067.40	\$475,000.00	\$0.00	\$637,067.40	\$637,067.40
Jewish Family Services, Inc.	\$105,000.00	\$200,000.00	\$0.00	\$305,000.00	\$305,000.00
Total	\$598,915.55	\$1,176,680	\$0	\$1,775,595.55	\$1,775,595.55

*Represents an agreement with at least partial grant funding.

Shakita LaGrant-McClain

Shakita LaGrant-McClain, Director
Department of Health and Human Services

Cc: Richard Canter, Finance Chairperson

COUNTY OF MILWAUKEE
Inter-Office Communication

Date: May 29, 2024

To: Mary Neubauer, Chairperson – Milwaukee County Mental Health Board

From: Shakita LaGrant-McClain, Director, Department of Health and Human Services

Subject: A report from the Director, Department of Health and Human Services, notifying the Milwaukee County Mental Health Board of a Prevention Services Purchase of Service Contract initiated with Safe and Sound, Inc, and subsequently terminated.

File Type: Informational Report

BACKGROUND

The annual Behavioral Health Services (BHS) budget process begins each spring with preparation of a proposed budget as part of the Milwaukee County Executives budget request to the Milwaukee County Behavioral Health Board and the County Board of Supervisors. In tandem with the budget process, DHHS Contract Administration began the planning and preparation for the BHS contracts related to the proposed budget for the 2024 fiscal year. In order to establish tentative contract amounts, Contract Administration obtained spending projections from BHS Fiscal for all current BHS service contracts to establish tentative budget allocations for 2024. The spending projections included a tentative 2024 Purchase of Service Contract budget allocation for Safe and Sound, Inc.

ISSUE

On 4/9/2024, BHS Milwaukee County Department of Health & Human Services (DHHS), Behavioral Health Services (BHS), CARS, entered into a 2024 Purchase of Service Contract with Safe and Sound, Inc. to provide Prevention Services, information, education, and training to individuals, their families, and the general public to increase awareness and reduce the stigma related to mental illness, substance abuse, and co-occurring disorders.

On 4/12/2024, Safe and Sound Executive Director, Bridget Robinson-Whitaker was notified by CARS Director, Jennifer Wittwer, that the contract was received as a result of a clerical error and that Safe & Sound would be receiving a contract cancellation notice early the following week. Also, on 4/12/2024, DHHS Contract Administration received an email from Ms. Robinson-Whitaker protesting the intended contract termination.

In October of 2023, while Prevention RFP proposals were still in the process of being scored, a request for authorization to execute a 2024 prevention contract with Safe and Sound, Inc. based upon the tentative 2024 budget allocations, went to the Milwaukee County MHB and was subsequently approved on 10/26/2023.

On 4/19/2024, the Milwaukee County Department of Health & Human Services (DHHS), Contract Administration, responded to Safe and Sound's 4/9/2024 grievance, upholding its decision to terminate the contract. The response said in part:

Although Safe and Sound was an incumbent contractor for Prevention Services, it did not apply for the BHS Prevention RFP which was published July 2023 and closed on September 8, 2023. As a result of the October 2023 MHB action, a 2024 Purchase of Service (POS) contract for prevention was mistakenly executed with Safe and Sound on 4/9/2024. Because Safe and Sound did not apply in response to the RFP solicitation, it was not recommended for an award, and BHS was unable to grant it a contract. This decision is consistent with standards and practices as identified in the BHS Purchasing and Procurement Policy: https://milwaukeecountydhhs.policystat.com/policy/token_access/cf39a52c-d4c5-45aa-92ce-61f269eaead4/.

Continued funding for DHHS programs is contingent upon the appropriation of sufficient funding in the budget process and continued availability of funds. As a result of the RFP process, funding was not budgeted for Safe and Sound, Inc.

The response went on to say:

Per Safe and Sound's 2024 Purchase of Service Contract, it is understood that the ability of Milwaukee County to contract for these services is dependent on appropriation of the necessary funds and receipt as provided for in the adopted budget. The County, therefore, reserves the unilateral right to terminate participation in such service upon ten (10) days written notice when it appears that the funds budgeted or provided through grants for such purpose will be exhausted or terminated. For the abovementioned reasons, BHS is giving thirty (30) days written notice of termination of Safe and Sound's 2024 POS Prevention Services contract, # BHS-POS356-042024, which will terminate on 5/19/2024.

In addition to BHS contract termination rights as cited above, BHS Legal and Contractual Remedies, §1-101, Authority to Resolve Protested Solicitations and Awards, does not provide appeal rights in response to a contract cancellation grievance.

RECOMMENDATION:

This report is for informational purposes only, and no action is required.

FISCAL EFFECT:

This report is informational and has no fiscal impact.

PREPARED BY:

Dennis Buesing, Contract Administrator, Department of Health and Human Services

APPROVED BY:

Shakita LaGrant-McClain

Shakita LaGrant-McClain, Director, Department of Health and Human Services

ATTACHMENTS:

None

cc: Richard Canter, Chairperson, Milwaukee County Mental Health Board Finance Committee

COUNTY OF MILWAUKEE
Behavioral Health Services Administration
Inter-Office Communication

DATE: May 30, 2024

TO: Mary Neubauer, Chairperson – Milwaukee County Mental Health Board

FROM: Michael Lappen, Administrator, Behavioral Health Services

SUBJECT: **Report from the Administrator, Behavioral Health Services, Providing an Administrative Update**

Background

The purpose of this standing report is to highlight key activities or issues related to the Milwaukee County Behavioral Health Services (BHS) since the previous Board meeting and provide ongoing perspectives to the Milwaukee County Mental Health Board regarding the work of the organization and its leadership.

Discussion

- **Bloomberg Overdose Prevention Initiative**

Out of more than 3000 Counties in the USA, Milwaukee County BHS was selected with 29 others to participate in an overdose prevention effort funded by Bloomberg Philanthropies. BHS hosted a regional meeting in 2023 and were invited to participate in the annual meeting on May 9th and 10th in New York to share our experience and to learn from the other participating Counties and service providers. Milwaukee's own Tahira Malik of Samad's House was a presenting panelist for a session titled, *Black Led National and Local Organizing Efforts for Harm Reduction*. She did a great job representing our local partnerships in this space. The BHS Administrator was invited to attend several sessions on Opioid Settlements, and it quickly became clear that Milwaukee County was by far the most transparent and inclusive entity in its approach to allocating settlement funds. Specifically, our regrating efforts targeting diverse local harm reduction and prevention partners seemed to be unique amongst providers from around the country. Several potential collaborations were discussed, and representatives from Vital Strategies—an agency funded by Bloomberg to operate in Wisconsin and several other States with higher overdose rates—made many connections with like-minded individuals to stimulate continued idea sharing and collaboration around prevention and harm reduction. We look forward to continued participation and will continuously look to refine and grow our harm reduction and prevention efforts locally with support from Bloomberg, Vital Strategies, and many local partners.

- **BHS Future State Space**

In mid-2025, the newly built DHHS building is expected to be completed. BHS Administration and service areas for both adults and youth will move into the new building. Some of the BHS direct service operations had been planned for a move to a community health center location (Milwaukee Mobile Crisis, MPD and Sheriff's CART, Transport Team, and ACT Community Support Program), but we were unable to come to acceptable terms and this space is no longer viable. The long-term plan will be for the location of these services is to be in a re-purposed, re-modeled historic Coggs Building with an estimated completion date in 2027. Due to this unexpected challenge, the service areas will need to temporarily relocate to another location by summer 2025 as there is not adequate vacant space available in the new DHHS building. BHS leaders, along with Economic Development project management, have toured four potential locations for this temporary move and are in discussions with building management of a location that can meet services building needs: approximately 17,000 square feet (Crisis - Total SF plus 35% circulation is 12,976.2 (~13,000 sf) and ACT - Total SF plus 35% circulation is 3,920.4 (~4,000 sf)); a separate and distinct entrance for ACT that includes a client waiting area, group rooms, statutory required needs; parking for up to 50 vehicles (including 18 Milwaukee County vehicles used by the county staff) plus police squad cars; on a bus line; close highway access for mobile services, etc. While this need for temporary space was unforeseen, and the disruption for staff will be significant as they will have had to move several times with the closure of the BHD Hospital facility, the result will be an excellent central location specifically designed and appointed for the BHS program areas housed there. There will also be very positive synergies to other DHHS programs and services which will be operating next door, and this should help all staff deliver on the promises of No Wrong Door.

- **Social Development Commission (SDC)**

As many are aware, the Social Development Commission (SDC) abruptly ceased operations in early May 2024. SDC had been awarded a contract for \$364,619.00 via RFP from the Substance Abuse Prevention and Treatment Block Grant (SATBG). SDC prevention staff had been working with BHS CARS staff up until the closure, but SDC only invoiced \$31,396.00 for their January through March 2024 efforts. We have given notice to terminate the SDC contract. Our intent is to issue a new prevention RFP to seek a new provider/providers to use the unspent funds to provide these services. There were two other agencies selected as part of the RFP, so we do not expect much impact to our community as the SDC funds will be reallocated to a new provider, and the other current providers can fill any short-term gaps created by this unfortunate situation.



Michael Lappen, Administrator
Milwaukee County Behavioral Health Services
Department of Health and Human Services

Zero Suicide at Milwaukee County Behavioral Health Services



MILWAUKEE COUNTY
DEPARTMENT OF HEALTH
& HUMAN SERVICES
**BEHAVIORAL
HEALTH SERVICES**



**ZERO
SUICIDE**

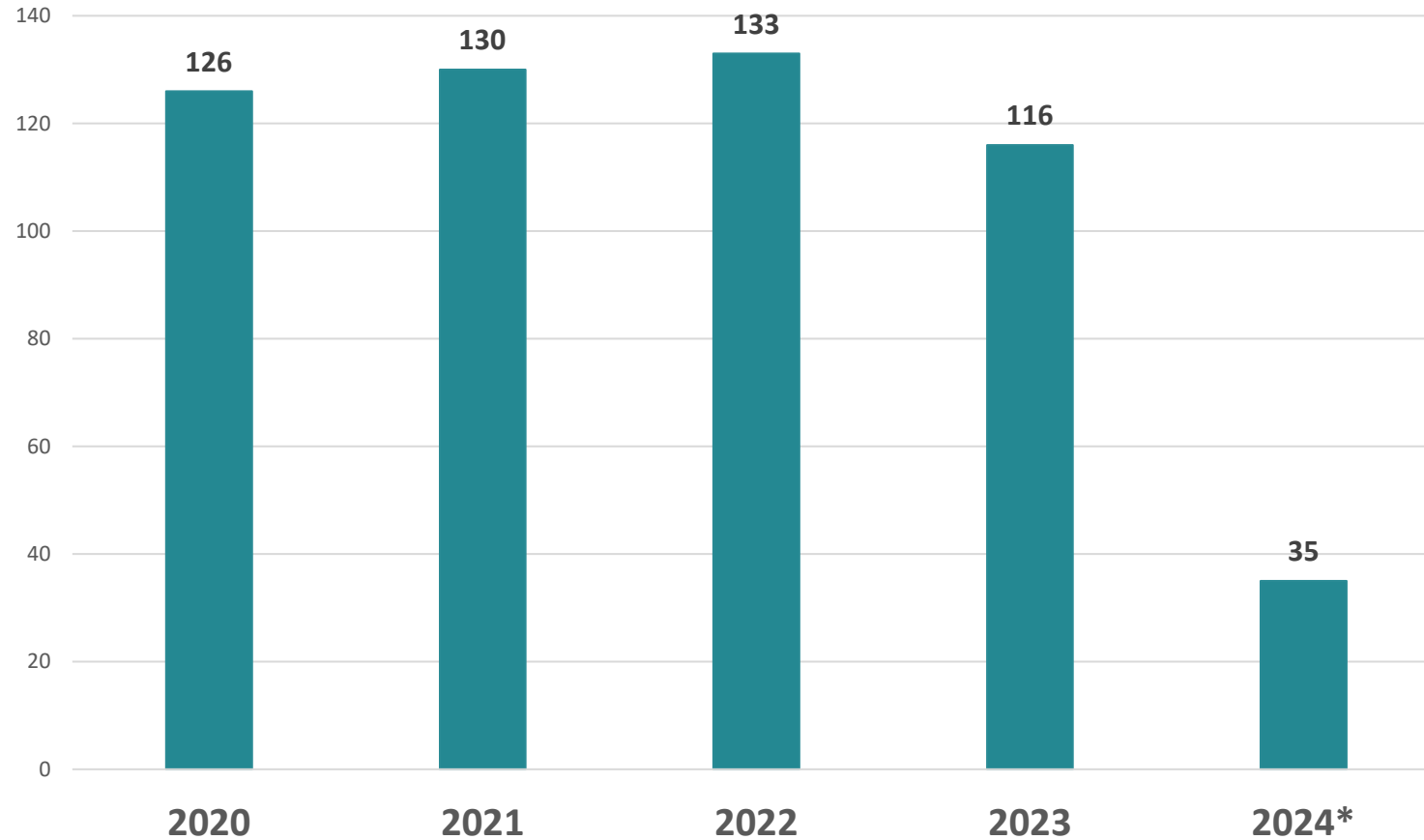
Zero Suicide Vision & Mission

The vision for this work is to eliminate death by suicide for individuals connected to care and across Milwaukee County.

Our mission is to implement and sustain a comprehensive set of practices across DHHS to improve our system of care.



Suicide Deaths by Year in Milwaukee County



Analysis by Sex, 2023

Milwaukee County (2023)

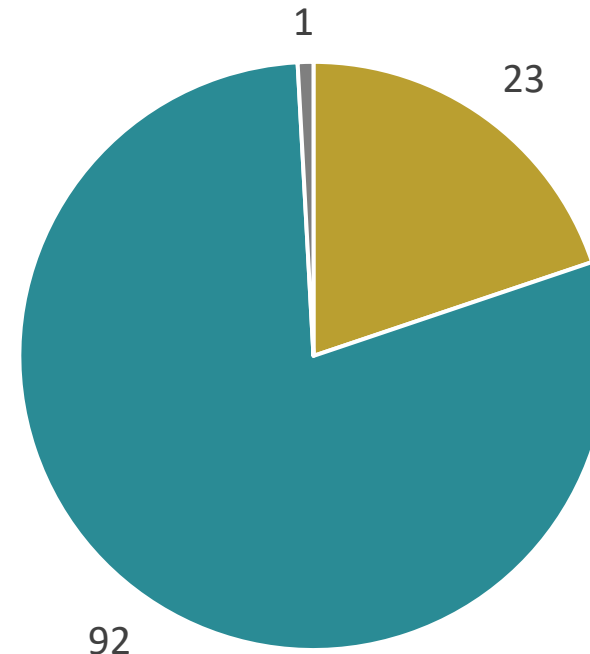
20% female
79% male
1% unreported

United States (2022)

20.6% female
79.4% male

So far in 2024...

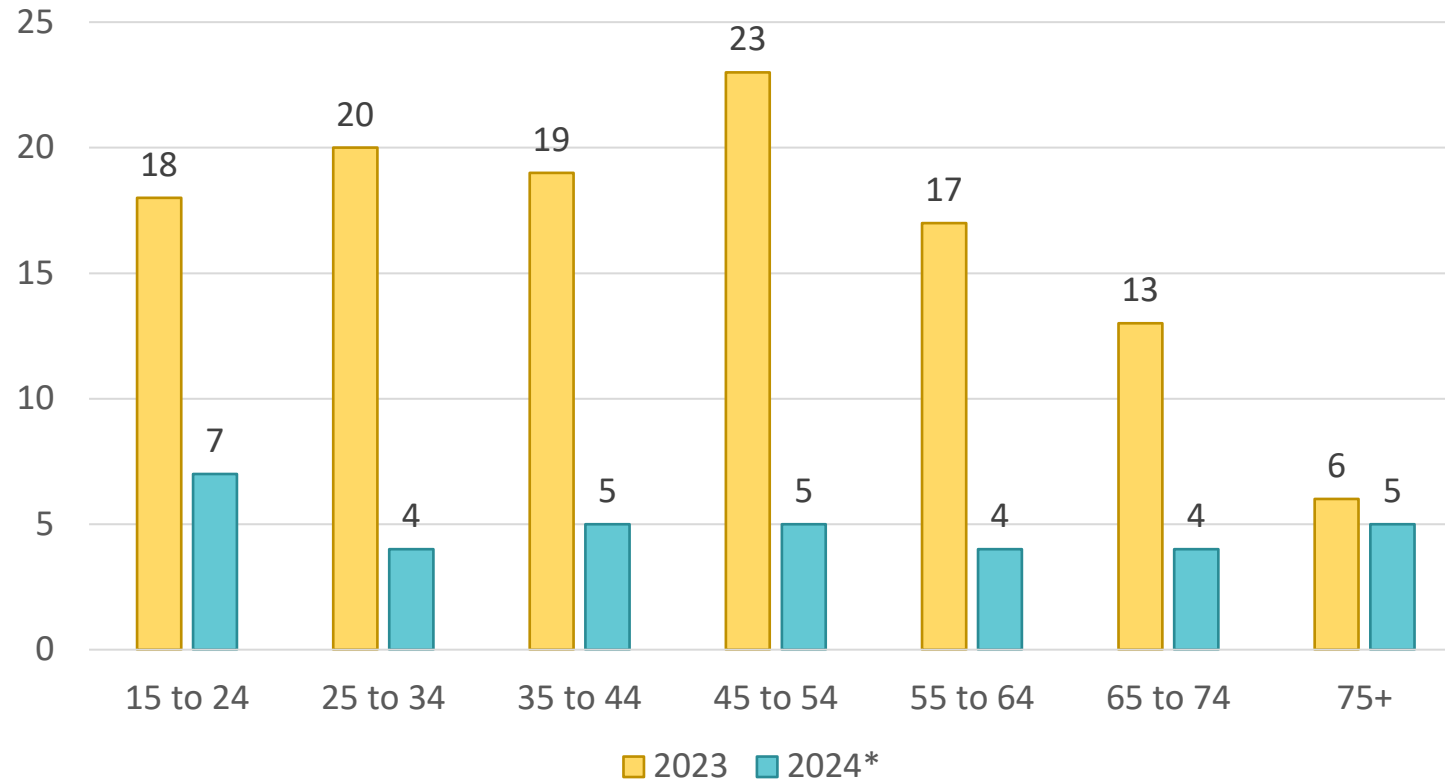
11% female, 89% male



Female Male Unreported



Analysis by Age, 2023



Under 25

Milwaukee County : 15.5%
United States (2022): 13.2%

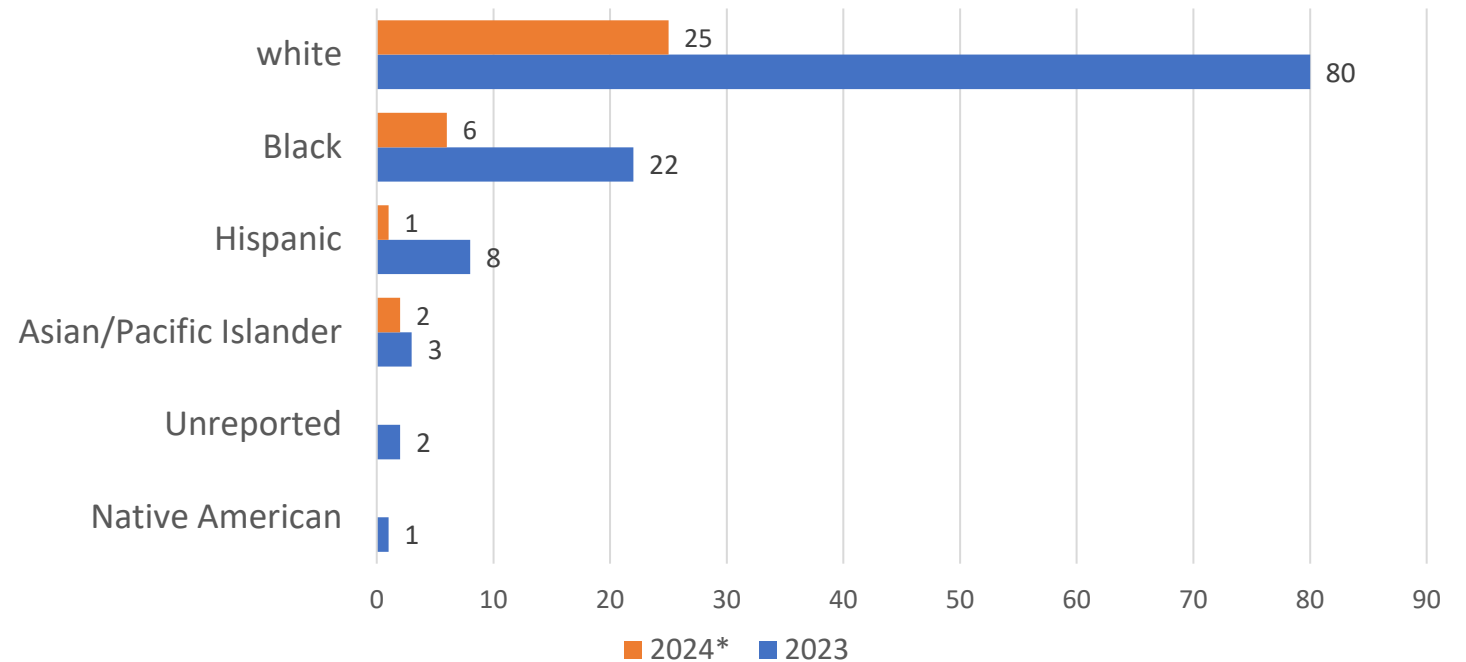
Ages 25-44

Milwaukee County: 33.6%
United States (2022): 34.1%

Over 45

Milwaukee County: 50.9%
United States (2022): 52.7%

Analysis by Race and Ethnicity, 2023



American Indian or Alaska Native

Milwaukee County: 0.9%

United States (2022): 1.3%

Asian/Pacific Islander

Milwaukee County: 2.6%

United States (2022): 3.14%

Black or African American

Milwaukee County: 19%

United States (2022): 7.7%

Hispanic or Latino

Milwaukee County: 7%

United States (2022): 10.4%

Multiracial

Milwaukee County: -

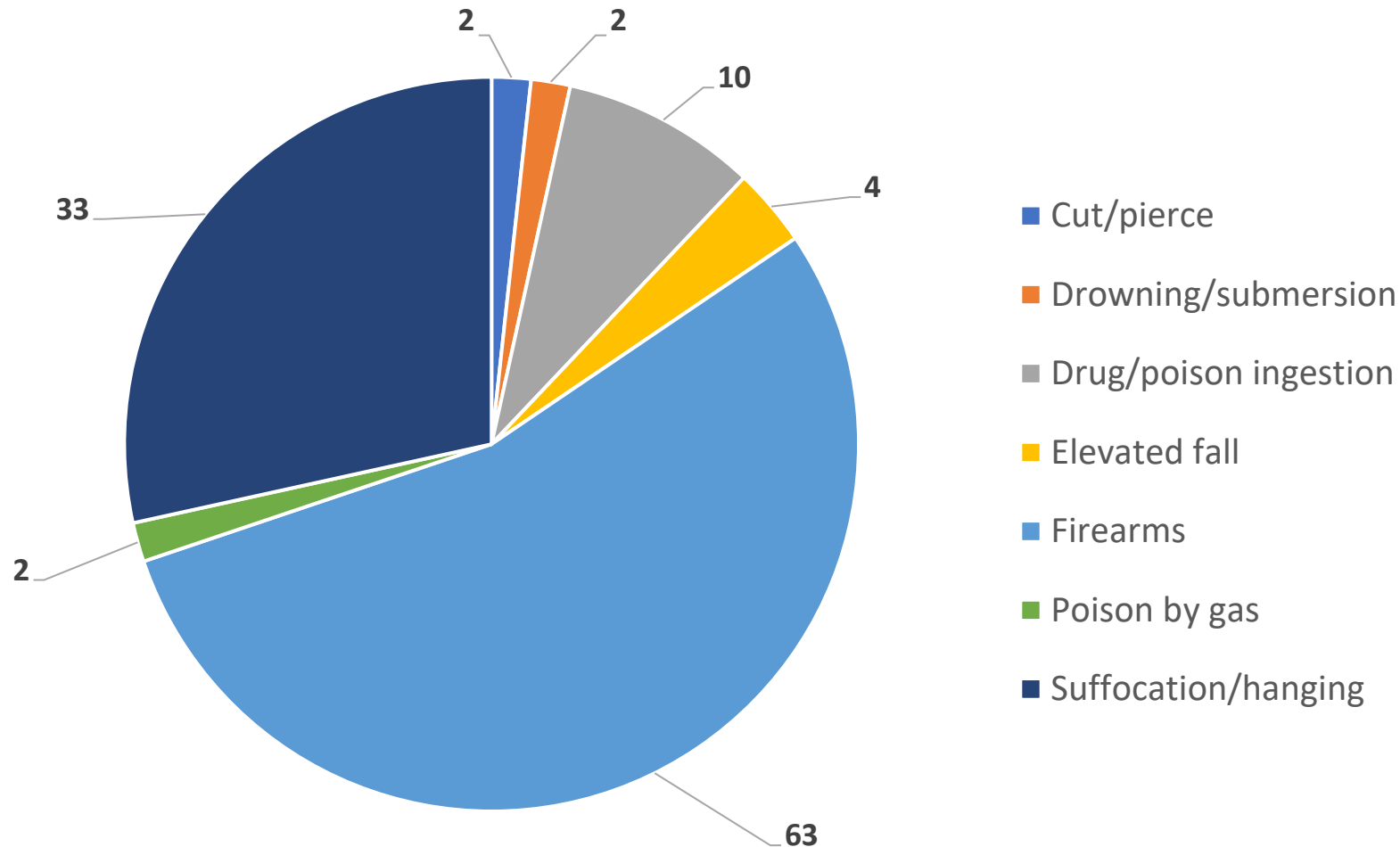
United States (2022): 1.4%

White

Milwaukee County: 69%

United States (2022): 75.8%

Analysis by Means, 2023



Firearms

Milwaukee County: 54%
United States (2022): 55%

Suffocation/Hanging

Milwaukee County: 28%
United States (2022): 26%

Drug/Poison Ingestion

Milwaukee County: 9%
United States (2022): 12%

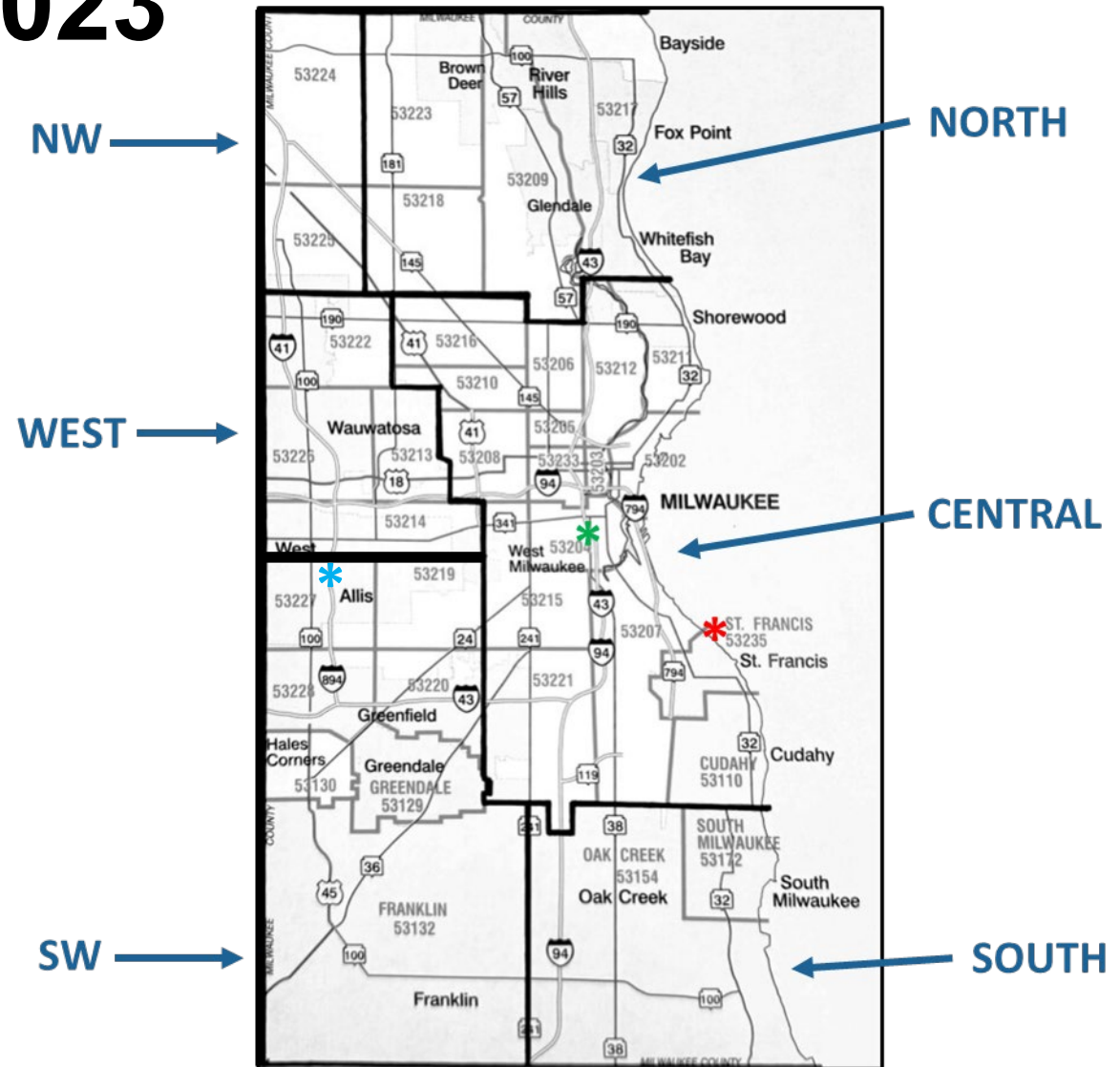
Other

Milwaukee County: 9%
United States (2022): 8%

Analysis by Zip Code, 2023

2023 Total Suicides: 116
Total per 100k: 12.5

Zip Code	Suicides	Population	per 100,000
53204	13	38,826	33.4 *
53235	7	9,434	74.1 *
53211	7	35,592	19.6
53132	7	36,415	19.2
53202	6	28,117	21.3
53214	5	33,840	14.7
53212	5	28,104	17.7
53227	5	22,628	22.0 *
53210	4	24,848	16.0
53154	4	36,767	10.8



Suicide Safer Care and Suicide Prevention



**MILWAUKEE
COUNTY**

Zero Suicide Workgroups

Screening, Assessment & Safety Planning

Treatment Planning

Training Plan Development & Implementation

Reporting & Data

Community Collaborative



Zero Suicide in Action

- ZS Overview Training in Healthstream for all DHHS staff
- Suicide Awareness Training during New Employee Orientation
- Expanding standardized suicide screening
 - Columbia Suicide Severity Rating Screening (C-SSRS)
- Expanding standardized suicide assessment
 - Suicide Assessment Five-Step Evaluation and Triage (SAFE-T)
- Safety Planning (with Counseling on Lethal Means Restriction)
- Quarterly Providing Hope, Promoting Help Newsletter



Cross Collaboration in Zero Suicide

- Suicide Prevention Keynote Speakers
- Establishment of 55+ and older adults action group
- Data analysis of deaths by suicide in Milwaukee County to inform prevention efforts.
- Suicide Death Review Commission
- Prevent Suicide of Greater Milwaukee
- Postvention Support



Looking Ahead

- Ensuring fidelity across BHS
- Aligning screening, assessment, and safety planning across BHS
- Introducing suicide prevention efforts across DHHS
- Expanding training opportunities for suicide prevention and suicide safer care for DHHS for non-clinical service providers
- Postvention as Prevention
- Alcohol and Suicide Prevention



BHS, Suicide Prevention, and No Wrong Door

Social Determinants of Health



BHS and DHHS utilizes the “No Wrong Door” approach to service engagement and enrollment while also identifying and addressing the social determinants of health to improve the quality of life of the people we serve.



THIS IS THE RIGHT DOOR.

Together, creating healthy communities.

Questions

Clare Martell, MPH

Suicide Prevention Administrative Coordinator
clare.martell@milwaukeecountywi.gov

Alex Zurek, LMFT

Lead Behavioral Health Emergency Services Clinician
alex.zurek@milwaukeecountywi.gov

You deserve mental health
and crisis support...

Milwaukee Mobile Crisis

(414)-257-7222

988 Suicide & Crisis Lifeline

Call 988





**MILWAUKEE
COUNTY**