

COUNTY OF MILWAUKEE
Behavioral Health Division Administration
INTER-OFFICE COMMUNICATION

DATE: June 27, 2013

TO: Supervisor Peggy Romo West, Chair Health and Human Needs Committee

FROM: Héctor Colón, Director, Department of Health and Human Services
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SUBJECT: **From the Director Department of Health and Human Services, providing an informational report update on the Department's current downsizing initiative of the Behavioral Health Division Center for Independence and Development (formerly Hilltop)**

Introduction

The 2013 Milwaukee County Adopted Budget includes the downsizing of 24 beds at the Center for Independence and Development (CID). The Health and Human Needs Committee directed DHHS to provide periodic updates on the progress of this initiative. The following highlights the current status of the downsizing initiative.

Background

In August 2012 BHD submitted a notice of intent to downsize the CID to the State of Wisconsin as required by section 50.03(14) of the Wisconsin Statutes. This notice of intent or relocation plan was approved effective September 10, 2012 and a relocation team convened by DHS has been working in earnest since that time to oversee the downsizing process and to ensure that plans for those individuals who relocate are satisfactory to meet the individual's needs.

In conjunction with the Disabilities Services Division (DSD) and the Department on Aging (MCDA), the Behavioral Health Division (BHD) has been working to permanently close the 24 beds. BHD has worked collaboratively with both DSD, MCDA and the Family Care Managed Care Organizations (MCOs) which are responsible for developing individualized service plans for all persons who will be relocated. The overall goal of this collaborative effort is to create an integrated system of care with a focus on community residence and appropriate support services.

The downsizing process is strictly governed by the DHS's Resident Relocation Manual which prescribes the role of a relocation committee in identifying community placements for residents. This committee meets on a biweekly basis and consists of members from BHD, DSD – Disability Resource Center, MCDA, DHS relocation officials, State Ombudsman, Disability Rights Wisconsin, and the MCOs. A relocation specialist from DHS facilitates the meeting. The process is meant to ensure that proper discharge planning occurs in collaboration with all interested parties.

The team began meeting in September 2012 to review each resident's relocation plan and identify potential community placements. The Family Care MCOs and their teams are charged with working with the families, guardians and BHD staff to identify resources to meet the unique needs of each person identified to be transitioned. Some guardians have expressed concerns but these are being addressed on a case-by-case basis.

This is a person-centered planning process that requires the identification of personal outcomes, choices for living arrangements and the supportive services needed.

Current Status Update

Nine people have been relocated or transitioned from Hilltop. In addition, 14 more individuals have been enrolled and are in various phases of the relocation process. A number of these guardians did not participate in options counseling and select an MCO until late in April or May 2013. The Department has had discussions with the MCOs and they are working hard to relocate individuals. The MCOs are aware of the time sensitive nature of the relocation plan and are taking the time necessary to ensure that all individuals have a successful community placement.

The Relocation Team initially got off to a somewhat slow start due to the complexity of the team composition and the need to clearly define roles and responsibilities of all involved. More recently, the Team's process has been improved and they have established some momentum with the relocations. They are continuously evaluating the steps of each completed relocation, to determine what improvements can be made to expedite the process. For example, BHD staff are now preparing the transfer packets for MCOs the moment they learn of the enrollment date to reduce any lag time in information. Procedures and coordination for each step of the relocation process is being improved through the work of the Relocation Committee. The Department has met with the CMOs and we are hopeful that this project will be completed by September 2013.

It should be noted that in only one instance has an individual who was relocated from CID returned from the community. This occurred prior to the formal Chapter 50 team began its work to monitor relocations. Also, in one other instance, the individual who relocated was brought to the family home after the relocation because the mother of the individual perceived that her daughter was in a vulnerable situation. However, the mother continues to still be interested in community options and we continue to work with her.

DSD has been working with guardians to provide tours of community options that might be available. We are also working with guardians on a one-to-one basis to be certain they are comfortable with the community options available and that all their questions are answered to assure a successful outcome.

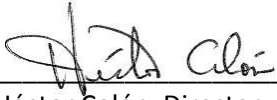
The transition process for residents is being supported by a number of initiatives intended to address the needs of residents as they are relocated to the community including The Model Apartment Program (MAP). In mid-February, BHD opened a model apartment to provide opportunities for residents to practice skills such as personal care, household chores, handling money, use of community resources and coping, among other activities. Residents are being integrated into the program by following a curriculum prepared by a clinical interdisciplinary team lead by Dr. Gary Stark, Clinical Program Director. The efficiency apartment includes a small dinette, living room, and bedroom. The apartment is one of the focal points of extensive training along with expanded community integration opportunities.

Next Steps

The next few months will focus on relocation of CID residents and closing the remaining beds in order to complete the 24-bed reduction. We continue to be optimistic that the project will be completed successfully. It should be noted that a closure plan for all remaining beds at CID is being submitted during 2013. Please see the report submitted to the Health and Human Needs Committee in July 2013.

Recommendation

This is an informational report. No action is necessary.



Héctor Colón, Director
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