

**Waukesha County Mental Health Center**  
**Mental Health Advisory Committee Meeting (MHAC)**

**And**

**Comprehensive Community Services (CCS) Coordinating Committee**

**November 14, 2016**

**Present MHAC Committee:** Danielle Birdeau, Terry Findley, Cathy Friend, Colleen Gonzalez, Jessica Grzybowski, Brad Haas, Mary Madden, Karen McCue, Helen Prozeller, Lisa Riggle, Joan Sternweis, Shannon Stydahar

**Excused:** Jennifer Cera, Linda Cole, John Kettler, Laurie Kohler, Mary Lodes, Kathy Mack, Maura McMahon, Mike O'Brien, Marybeth VanderMale

**Guests:** Tracy Allman, Mary Bliesner, Shannon Hammer, Jake Mattson

**1. Call to Order**

Chair Madden called the meeting to order at 1:38 p.m. Introductions were exchanged among the committee members, and a warm welcome extended to the Comprehensive Community Services (CCS) committee members and guests present.

**2. Review and Approval of Minutes**

Motion: Birdeau moved, second by Prozeller to approve the minutes of October 17, 2016.  
Motion carried unanimously.

**3. Discussion Regarding MHAC Objectives for 2017**

Madden is looking for ideas of future educational segments either for the MHAC or CCS Committee. She reviewed some of the previous educational segments that have been presented for the MHAC.

Birdeau reviewed the purpose and mission statement of the MHAC.

The committee members and guests offered topics that addressed education, initiatives, and advocacy.

Some of the topics to have as education topics for MHAC that were given included:

- Stairway to Heroin (will be presented at January, 2017's joint meeting with the AODA Advisory Committee)
- Housing Action Coalition
- ADRC with community resources ideas
- HHS access to services
- Economic resources (center)
- Cultural humility
- Waukesha Freeman (discussing their mission to community)

- Based on previous experiences, the newspaper will typically charge for articles or advertisements. If the article is done for free, it is at the newspaper's discretion as to what gets included. Letters could be sent to the editor. We could ask request to have a reporter come to the meeting(s) and speak on what they could do.

Some of the topics that would address initiatives and advocacy for MHAC that were given include:

- Access to services
- Formal reports from programs
- Peer specialist training (including possibly writing a letter from the MHAC)
- Suicide prevention initiatives
- Gaps in mobile crisis resources (such as needing more positions)
- Youth-specific support (with school collaboration)
- Peer-run respite
- Housing Authority and vouchers
- How can MHAC get information to the greater committee?
- HHS Board needs more education/awareness of mental health needs/issues

Other MHAC changes that were discussed include:

- Having a back-up report back to the HHS board in the event that Mary Lodes is unable to attend an MHAC meeting.
- Having regular report-outs for the initiative/advocacy areas of peer specialist training and suicide preventions.
  - The agenda will be changed from "Old Business" to "Ongoing Business / Community Initiatives"
- There will be an annual calendar created to track when formal reports from programs will be occurring.
- The agenda will have "Agency Updates / Announcements" added.
- The agenda will have "HHS Staff Liaisons" added.

#### 4. Sub-Committee Reports

##### a. Board Liaison Report – Mary Lodes

No meeting, so no report.

##### b. CCS Coordinating Committee – Danielle Birdeau

Allman reported that 122 ROSI surveys were distributed, and 39 surveys were received back via the planned event, group homes, and word of mouth. 7-9 people came to the planned event. There was a Peer Specialist on hand to help during the event. Birdeau reported that the state would like an 80% response rate. Birdeau suggested that the Coordinating Committee discuss alternatives for next year for collecting the information with a greater response rate.

Adults are administered the ROSI survey. Minors received the MHSIP survey.

The surveys are currently on paper. If a county wants to computerize it, the county has to do it on their own. A possibility would be to utilize a program like SurveyMonkey, but then participants have to access a computer.

While a certain time period to administer the survey is not required, it has to be given to those that have been part of the program for 6 months or more. Also, because the surveys are anonymous, we cannot control if people are taking the survey more than once.

**c. Peer Specialist Committee of Waukesha County – Cathy Friend**

Friend reported that the active members are busy with other committees. Regularly scheduled meetings are going to be suspended, but they will remain active in other committees that they serve. She is hoping that once more peer specialists are trained, regularly scheduled meetings will be back up.

**d. CHIPP Report – Mary Madden**

No report.

**e. Partnerships for Children's Mental Health – Laurie Kohler**

Birdeau reported that there will be a meeting this week Wednesday (November 16) at 4pm. The Coordinated Service Team (CST) is moving under Birdeau's unit. Children enrolled in CCS will be evaluated to determine if they are eligible for CST enrollment as well.

**5. Old Business**

Prozeller said she was pleasantly surprised to see how many insurances are covering outpatient services now at HHS.

Stydahar inquired on any updates on shelters for the colder weather coming. Madden stated that request for proposals have went out from the Housing Action Coalition (HAC) for a location to operate a 20-bed overflow wet shelter for men, which would open January 1st. Currently, they were getting some waivers to possibly have it at the Northview/Grandview location, but this would be the last year because the school is getting torn down. HAC is working on starting a more permanent location. They are also looking for hotel vouchers through a grant.

The Salvation Army opened 5 overflow beds. Hebron House, Jeremy House, and Sienna House are taking drop-ins and will not turn anyone away.

There is a Coordinated Entry Procedure being used by Impact 2-1-1, however HUD has not yet mandated it for shelters. In our community, it is being used for transitional housing and permanent supportive house per the current HUD mandate, but not yet for shelters. The procedure that Impact 2-1-1 is using currently does not allow those experiencing homelessness in Waukesha to be diverted to a Milwaukee shelter when Waukesha Shelters are full unless it is someone who is fleeing a domestic violence situation. Waukesha does take those who present themselves from Milwaukee. If a homeless person calls Impact 2-1-1, they are asked for the zip code that they are calling from. If the zip code is from Waukesha County, the person is given the number to Hebron House. If the zip code is from Milwaukee County, they will go through an assessment and placed on a priority list for shelter.

Men do not tend to access the shelters until the weather is real inclement.

**6. New Business**

The public hearing for Human Services is April 6, 2017, from 7-9pm.

Madden commented that the November 1<sup>st</sup> Suicide Prevention Conference had just shy of 200 participants. There was a lot of great feedback, including 3 new high schools that have contacted them about wanting more information. Another meeting for the Suicide Prevention Initiative is being planned and a notice will go out when finalized.

Sternweis reported on the Open Access that just started in the outpatient clinic this afternoon. Now, when someone calls the HHS Outpatient Clinic at 262-548-7666, rather than be given an intake date that could be a week or two in the future, they are given the open access hours (Monday, 12:30-4pm; Tuesday-Friday, 8-10am and 12:30-3pm). The client can then come in at that time and be seen right away. Anyone that has an intake appointment currently scheduled are being seen then, but going forward, they will be told to come in when they are ready. At the end of the intake meeting, there will be at least one treatment goal determined, as well as a therapist appointment setup within about a week. Admission Specialists have been training to answer all calls concerning scheduling and insurance questions. The outpatient clinic will also be starting more groups in lieu of more one-on-one appointments.

McCue left at 2:54pm.

Grzybowski left at 2:57pm.

**7. Other**

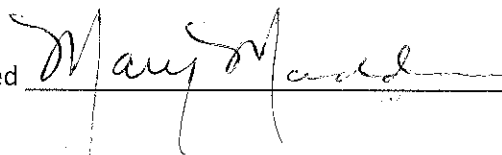
No other business.

**8. Adjourn**

Motion: Stydahar moved, second by Friend to adjourn the meeting at 2:59 p.m. Motion carried unanimously.

Minutes respectfully submitted by Janelle McClain.

Minutes were approved



Date

1/16/17