

HUMAN SERVICES COMMITTEE  
Minutes of Meeting  
July 6, 2010  
Kenosha County Administration Building

Committee Members Present: Terry Rose, Jeff Gentz, Mike Goebel, David Celebre, David Arrington, Megan Jekot & Ryan Joseph (YIG)

Staff Present: John Jansen, Jim Truchan

Others Present: Mary Jonker

1. Call to Order

The meeting was called to order at 6:30 p.m. by Terry Rose.

2. Citizen's Comments - None

3. Approval of Minutes: 5/18/10

MOTION to approve minutes by Jeff Gentz, seconded by Mike Goebel. MOTION CARRIED UNANIMOUSLY.

4. DADS Presentations: Mental Health Jail Diversion

Jim Truchan, Manager for Mental Health and Protective Services, stated that Racine and Kenosha Human Services received a planning grant from BJA to study how mentally ill people ended up in jail. Out of 246 applications, we were one of 43 selected. With in-kind match, the total budget is \$366,355. But the federal grant amount is \$227,652, or \$45,530 per year for each County for 2.5 years.

We involved the Police Dept, Sheriff's Dept, Judges, hospital ERs, DAs, PDs, etc. to learn why people ended up in jail when they could have been diverted. We learned that the law enforcement community was not aware of resources for mentally ill people.

The goals are to identify mentally ill persons at the time of booking, using prompt screening and assessments; develop and formalize an integrated service approach to improve interagency collaboration; provide safe and effective alternatives to incarceration; provide community-based comprehensive and intensive treatment services and supports; and improve quality, accessibility, and availability of mental health services. It is rare that we get to work with so many different systems. Through this process, we will come to an agreement for jail diversion and get the public defenders and DA's to agree on the plan. These are misdemeanor cases - not criminal cases.

We will develop discharge plans when individuals are released. If we can't come to an agreement for jail diversion, we will catch the person when they are released from jail. We are looking at who is being booked in the jail every day. The jail nurse, JoAnn Medley, is very good. She has been doing this for a very long time.

It's an expense for the Sheriff to put people in the jail. Outpatient treatment can be more cost effective than housing in jail.

We are currently accepting referrals to this program. Terry Rose asked Mr. Truchan to put this on the Kenosha County Bar as an announcement to get this information out to the attorneys. They see many mentally ill people and could possibly refer these people to this program.

Jeff Gentz said that he would like to know how this impacts Kenosha County financially in the future when grants like this are received and then end. He further expressed concern that we don't have any referrals yet and this started 4/1. Mr. Truchan explained that we have done some training, and this is a difficult process. Our goal is to have 12 people. That is all our budget will support. It just takes a while to get this thing going. Drug Court started 7/1 last year and we have 12 people in that. It took a while, but we are there.

Mr. Truchan stated that we provide quarterly reports on these programs. Mr. Gentz requested copies of those reports. John Jansen said that we will track the outcomes and report back with the number of persons served for the Jail Diversion and Drug Court programs.

### Mental Health Inpatient Utilization

Outpatient services come out of the County's budget. Mental Health Institutions cost anywhere from \$650 to \$1,000 a day for inpatient care, so that is a larger cost, which is also passed on the County. We try to get SSI, Medicaid and Medicare (all federal benefits) right away, so that the costs are not ours alone. We also try to put people in the least costly services.

A grant provided training on Mental Health Crisis Intervention in June to ER personnel, Police clerks and officers, and service agencies. We received \$23,000 a year to train people in the community on how to work with people who are in distress. Skilled people can de-escalate a person instead of sending him/her to an institution. CIT training was held in May for the Police Dept. These are tools to keep people out of more costly inpatient care.

Inpatient utilization through May looks worse than it is. A deficit of \$200,000 is projected. Winnebago or Mendota inpatient care costs between \$900 and \$1,100 a day. Through May, 1,141 days have been utilized at these two institutions, but we still need to subtract Medicare and Medicaid payments once those are received.

The procedure currently followed is that the Police Dept. will take a mentally ill person to the ER, and Crisis will be called. Crisis will identify the person as a candidate for the KARE Center (the County, not the Police Dept., makes that decision now). Crisis will determine that the person is mentally ill, what treatment is needed, and if that person is a threat to themselves or others. Does this person need inpatient care or can he/she go to the KARE Center. We are now less reliant on inpatient psychiatric care. \$300 per day is better than \$1,000 per day. We have been taking people from Wheaton Franciscan Hospital and getting them the treatment resources they need. The Police Dept. and Crisis has a very good working relationship. Kenosha County does not pay for the ER bills. That's the patient's responsibility.

Another concern is that people are leaving nursing homes and being admitted to Winnebago or Mendota. Even though dementia is different than mental illness, they have to leave the nursing home, so they are admitted as inpatient. We will know in August how much of this we will have to pay. This is the most volatile part of the mental health budget.

5. Such Other Business as Authorized by Law - None
6. Committee Members Comments - None
7. Adjournment

It was moved to adjourn by Jeff Gentz, seconded by David Arrington. Meeting adjourned at 7:25 p.m.

Respectfully submitted,

Sharon Davis  
KCDHS Secretary

F:Sharon/HSCmin 7-6-10