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EXPERTS TALK FUTURE OF MENTAL HEALTH SERVICES IN MILWAUKEE COUNTY, STATE

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More work needs to be done to support Milwaukee County’s transition to boost community mental health services and Wisconsin’s crisis services, experts said at a forum last week sponsored by the iCare Stakeholder Planning Advisory Committee.

Troney Small, a family navigator with Milwaukee’s Next Step Clinic, which offers family navigation services and autism diagnoses for children, shared how his brother was diagnosed with bipolar disorder and schizophrenia. He said that his brother faced challenges and was bullied during their school years.

“I remember one day, Justin looking at me and he asked me, ‘Why is this happening to me? Why do I have to be this way?’” he said. “I had no response, no answer, no words that I could put together to help him understand what it is he was going through it. But Justin continued fighting and working hard to be better than what people thought of him.”

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Small said there are a lot of kids like his brother today who have challenges but no one is there to talk about the things they're good at or give them hope. He said the Next Step Clinic aims to do that, meeting families where they're at, understanding their needs and letting them know about opportunities.

Milwaukee County is working on shutting its inpatient psychiatric hospital and transitioning services to the community.

Mike Lappen, Milwaukee County Behavioral Health Division administrator, said the plan will include pilot programs, additional services and a dedicated psychiatric emergency department.

The plan will emphasize prevention, early intervention, recovery and relapse prevention with acute intervention at the center but no longer the main focus, he said. The growth of community health services has already helped, he said.

"We reduced the number of emergency detentions and hospitalizations by making an intentional effort to provide the services it takes to avoid hospitalization," he said. "We have never served more people than we serve today."

He said that their partnership with Universal Health Services, which will take on patients currently seen in the county's inpatient hospital, will allow the division to hone in on their community-based services. That includes partnering with community health centers.

Shelah Adams, national director of behavioral health integration for Universal Health Services, said they plan to hold their official groundbreaking ceremony on the 120-bed West Allis facility on April 2. It's set to open in mid-2021.

She said they're planning to start recruiting talent soon for their leadership team and that they've been active participants in the Milwaukee Health Care Partnership. They're hoping to serve as a clinical training site for providers and work with law enforcement and school system.

"Our goal is to become a vibrant part of the Milwaukee community," she said.

Joy Tapper, Milwaukee Health Care Partnership executive director, said the county's psychiatric crisis redesign will enhance the capabilities of private health system emergency departments.

She noted that the area's private emergency departments served roughly three times the number of individuals seen by the county's emergency room with a primary mental health diagnosis.

"We've got to elevate the capabilities and the navigation resources and supports in those settings as well," she said.

They're currently doing due diligence on how to run the psychiatric emergency room as a public-private joint venture and working on redesigning the child and adolescent delivery model.

She said the biggest challenge with mental healthcare in the area is a workforce crisis. They also need to do a better job of having a diverse workforce at all levels.

"We have much to do," she said.

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Barbara Beckert, Disability Rights Wisconsin Milwaukee Office Director, said it'll be necessary to have a higher level of accountability for private providers in the community with the redesign.

While the county has made progress on building community services, it still has far to go, she said. That includes prioritizing prevention and early intervention programs.

And the county's redesign must include a component to divert people from the criminal justice system, she said.

It should also address the social determinants of health, support peer navigators and focus on racial, ethnic and disability equity.

"Access to services should be in the community, in the neighborhoods where people live," she said.

At the state level, Beckert recommended suspending, not terminating, Medicaid coverage for those in the criminal justice system.

She also called for taking federal funds to expand Medicaid, investing in regional crisis centers and Medicaid coverage of housing services.

Holly Audley, assistant administrator of the Division of Care and Treatment Services at the Department of Health Services, said they surveyed county human service agencies on mental health crisis last fall.

They're crunching the data, hope to share it soon and use it for budget proposals in the next biennium.

She said that counties need more resources for intervention, diversion and stabilization services.

Counties have also asked for settings below the inpatient hospital where those in crisis can receive initial evaluation and stabilization services in their community, she said. And the state needs better ways to coordinate between counties, law enforcement and providers.

There's a need for incentives to increase the psychiatric inpatient beds across the state for those who need treatment, she said. Expanded regional bed capacity would give counties more treatment options and reduce the burden of transporting those in crisis.

There's also a need to improve crisis response for those with dementia, she said. DHS is working on improving integration of behavioral health into the healthcare system across Wisconsin.

"The goal is to have holistic care for individuals and families," she said. "This will require us to focus on improving the health and well-being of Wisconsinites through increased cross-cutting prevention, treatment and recovery efforts, both inside and outside of an integrated healthcare system."

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