

**NORTH CENTRAL COMMUNITY SERVICES PROGRAM
HUMAN SERVICES OPERATIONS COMMITTEE
MEETING MINUTES**

July 16, 2014

4:00 p.m.

NCHC – Wausau Campus

X	John Robinson	EXC	Lee Shipway	EXC	Nancy Bergstrom
X	Linda Haney	X	Joanne Kelly	EXC	Holly Matucheski
X	Scott Parks	X	Greta Rusch		

Also Present: Gary Bezucha, Brenda Glodowski, Toni Simonson, Becky Schultz, Gretchen Brown, Laure Blanchard, Debbie Osowski, Mr. & Mrs. Bill Hall, Pat Snyder, Joanne Leonard, Judy Burrows, Bob Wilcox, Melissa Dotter, Joan Theurer

The meeting was called to order, roll call was noted and a quorum declared.

Welcome and introductions were made.

Consent Agenda

- **Motion** Kelly, 2nd Parks to approve the consent agenda, which includes the minutes of the 6/13/14 meeting and the financial reports. Motion carried.

Human Services Report

- Aquatic Services – As scheduled, the pool will be closed for one week in August for its annual cleaning. An ultrasound will also take place during this time which is a needed component for making decisions on the pool structure.
- Children’s Waiver and Community Treatment Services – Waiver services are provided in Langlade and Lincoln Counties and a significant crossover of services was identified. We are providing better triaging so children have the services to best meet their needs with the dollars available. There is a large need for children’s services in Langlade County. Staff is attending monthly meetings regarding referrals to make sure children are receiving services.
- Outpatient AODA/Psychiatry Program – The new Psychiatric Nurse Practitioner, Maureen MacConnell, completed her schooling at Yale and began her employment with us on Monday, July 14.
- Crisis and Behavioral Health – The census in inpatient and the CBRF remains strong and we continue to work with our local law enforcement staff and others to coordinate the need for necessary medical clearance for patients before they are admitted.

Early Intervention Services

- Vicki Tylka, Social Services, is currently working on gathering information on child abuse and neglect. She anticipates providing the information to Senator Jerry Petrowski for potential changes to the law. Law enforcement continues to look at how to increase efforts in these and struggles when needing to remove children from their homes.
- Toni will coordinate having Dawn Perez provide a presentation to the Committee on what constitutes abuse and neglect, making determinations, statutes, etc. She will also be able to look at roles, opportunities, and challenges for NCHC.

Behavioral Health Integrated Care (BHIC) Grant

- We are waiting for the Department of Health Services (DHS) to provide feedback after a joint meeting with them and the BHIC Oversight Committee held June 17.
- DHS was hoping to initiate the program in October.

Prescription Medication Grant

- We are about 1 ½ years into this grant.
- The grant is specifically for Langlade and Lincoln Counties.
- During the first year a lot of data was gathered and an infrastructure developed.
- Laure Blanchard and Dakota Kaiser have been working together on a Work Plan (see attached) including:
 - Health care training and education i.e. NCHC will be providing education in Langlade and Lincoln Counties which will also include Marathon County: CME training for three major medical organizations, institutionalize the diversion training for facilitating conversations of drug usage, training on screening and brief interventions with Dr. David Mays.
 - Establishing best practices i.e. working with physicians on best practices for prescribing drugs
 - Building coalitions in the three counties
 - Community monitoring
 - Medication disposal i.e. designing bags that include information on medication disposal drop locations
 - Sharps disposal
 - Work more closely with Hospice and community care
 - Working with law enforcement on training i.e. ARIDE (Advanced Roadside Impaired Driving Enforcement – a step in the process to be a Drug Recognition Expert)
 - Public outreach and education in schools
 - Drug intervention education professionals will be hosting a training at NCHC's Wausau campus; also working on providing a training for Langlade and Lincoln counties
- Laure is also in the process of becoming certified as a prevention specialist
- Working to provide additional services to inmates

Psychiatry Update

- New Psychiatric Nurse Practitioner began on Monday, July 14.

Alcohol & drugs in the community/AOD Partnership future/NCHC's role

- An exploratory meeting was held with AOD Partnership Council, Marathon County Health Department and NCHC to discuss/brainstorm current options including potential impacts with United Way.
- There is a solid commitment from all parties to work together so the Partnership will continue even in the absence of the grant.
- Comments/recommendations/options/suggestions:
 - Grant was for \$125,000 but feel program could get by with \$115,000. With United Way contributing \$20,000 towards that amount it is felt about \$80,000 is needed to fund the program.

- The cost of substance abuse to the community is about \$5,000,000 or \$38/resident. The community has demonstrated a commitment to the program with in-kind contributions, campaign initiatives, etc.
 - What will the impact be with the absence of the funding? Without a coordinator, we lose the expertise at a national model, connections at state and national level; lose the existing working relationships with key individuals/organizations. The committee agreed that a coordinator is an important role as they are the hub of the program. (Approximately 700 people receive updates from the Coordinator about what is happening in the county and state. It is felt the communication is vital and should continue.)
 - Without a dedicated staff (part-time or full-time), we may lose opportunities for future grants.
 - Coalition vs collective impact model:
 - *Coalition* - group of people who have similar ideas of what they want to happen; representing different agencies; networking occurs and sharing of information.
 - *Collective impact model* – create a shared mission together; identify who will bring resources to the table; when not getting results, see if things fit well and what can be done that other communities may not have done. There is more accountability among all members of a collective impact model.
 - SAMHSA Grants (Substance Abuse and Mental Health Services Administration) – many of these types of grants are tied to research and a 4-year school partner. They are very competitive and time consuming. The Council has applied for the STOP Grant. The Federal government has been cutting many grants over the last two years. Pat Snyder offered to investigate options through the federal government.
 - May want to inquire with business owners as they indicate they cannot hire due to potential employees not passing drug tests. Business owners have a stake in this initiative also.
 - Ideally, Marathon County would support and supplement the drug-free communities grant.
 - We need more than one option to fund the position and continue the coalition.
- Critical Needs of Partnership/Role:
 1. Seek ways to preserve the present structure which includes partnerships with United Way, and direct and indirect from NCHC.
 2. Aggressively pursue funding sources including federal grants; seek local partnerships.
 3. Recognize the coalition is following the same model as described as collective impact; look to increase contributions
 4. NCHC has applied resources toward the work of the AOD Partnership Council and will continue to do so.
 5. Tap into the resources and expertise of NCHC. Currently Toni is a member of the AOD Partnership Council. Laure is on the Heroin Action Team. NCHC can provide staff expertise, lead initiatives, look at how initiatives are publicized and deploy media strategies. Becky also offered to help leverage additional resources.
 6. Define commitment more concretely i.e. what service each can contribute, time commitment, etc.
 7. Identify strengths and weaknesses.
 8. Identify roles in the Partnership and what this means to the community.

The Committee agreed that it will be important to articulate what these services mean to the county and ability to respond to the epidemic confronting us, how important the coordinator role is, what the priority levels are and how to support each; and, that NCHC is fully supportive of the collective impact approach to ensuring an adequate response to the AODA needs.

Aquatic Update

- Have hired someone for the financial component
- Talking with community members and task force to identify needs
- Beginning discussions on fundraising in the community
- Will provide update as many are asking for more information

Future Meeting Agendas

- AOD Partnership Status/Update
- Early Intervention Services (w/Social Services)

Motion Haney; 2nd Kelly to adjourn at 5:35 p.m. Motion carried.

dko