

Wisconsin Department of Health Services

Division of Mental Health and Substance Abuse Services



2015 Annual Report

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**Wisconsin Department of Health Services
Division of Mental Health and Substance Abuse Services**

1 W. Wilson St., Rm. 850
Madison, WI 53707
608-266-2717

dhs.wisconsin.gov/dmhsas/index.htm



@DHSWI

YouTube /DHSWI

Introduction

Welcome to the Division of Mental Health and Substance Abuse Services (DMHSAS) 2015 Annual Report. This is the fourth edition of this report. Previous editions of this report showcased a number of measures by which we gauge our progress toward providing efficient and effective services. For this edition, we highlight key accomplishments of our seven major service areas in calendar year 2015 as well as indicators of the quality of services provided.

The need for mental health and substance use treatment and recovery services in Wisconsin continues to be significant. One in five Wisconsin residents will have a mental health need in any given year. One in ten will experience an issue with substance use in any given year.

With over 2,500 employees, DMHSAS is the largest division of the Wisconsin Department of Health Services in regards to the number of employees. Whether located at one of our four treatment facilities or at the central office, members of the DMHSAS team are united by the goal of delivering quality prevention, treatment, and recovery services to the residents of Wisconsin. The result of the work we perform in partnership with agencies and organizations at local levels throughout the state is stronger, healthier individuals and communities.

We thank all the dedicated individuals who contribute their expertise, hard work, and passion to make the important programs and services we manage and support successful. We appreciate your support and hope this report increases your understanding of our programs, outcomes, and those we serve.

Patrick K. Cork, ACSW
Administrator

Rose Kleman, Ph.D., M.P.A.
Deputy Administrator

Mission, Values, Service Areas

Mission

- **Provide** services to the people of Wisconsin and support the development of services and systems that are recovery focused, person and family-centered, client rights compliant, evidence based, and cost-effective.
- **Promote** an atmosphere of accountability through performance outcomes and use this data to inform our policy and decision-making.
- **Improve** the efficiency of operations within DMHSAS and in our collaborations statewide.

Values

The following principles guide DMHSAS actions:

- We have compassion and respect for the people we serve.
- We emphasize hope and optimism.
- We collect and analyze data to support quality improvement and decision-making that is objective, realistic, and respectful of the citizens of Wisconsin.
- We develop and support programs that reflect models proven to be effective, recovery oriented, person and family-centered and trauma informed.
- We expect meaningful consumer involvement.

Service Areas

Community Programs

- Bureau of Prevention Treatment and Recovery
- Office of Community Forensic Services

Psychiatric Hospitals

- Mendota Mental Health Institute
- Winnebago Mental Health Institute

Secure Treatment Centers

- Wisconsin Resource Center
- Sand Ridge Secure Treatment Center

Client Rights Office

Bureau of Prevention Treatment and Recovery

The Bureau of Prevention Treatment and Recovery oversees, supports, and funds Wisconsin's county and community-based behavioral health and human services providers. These programs include prevention campaigns, crisis intervention, comprehensive behavioral health programs for adults and children, peer-based services, and hospital treatment. The focus is on client-centered and recovery-oriented practices.



2015 Year in Review

- Published the *Wisconsin Suicide Prevention Strategy 2015*, which forms the basis for suicide prevention work within the state.
- Supported 12 Comprehensive Community Services regions through the steps necessary to begin serving clients.
- Partnered with Jefferson and Outagamie counties on models to improve outcomes for 16-25 year-olds with behavioral health needs through greater engagement and age-appropriate support services.
- Partnered with Rock County and Beloit School District on the diversion of youth with behavioral health needs from the juvenile justice system.
- Supported Coordinated Services Teams Initiatives in 67 counties and 11 Tribal Nations in the development of systems of care for children.
- Enhanced crisis services statewide through grants for certified mobile crisis teams serving rural areas and collaborative crisis intervention services for youth.
- Connected homeless veterans with behavioral health concerns to needed housing and treatment through the Veterans Outreach and Recovery Program and expanded the program from 46 to 49 counties.
- Supported the opening of a Peer Run Respite and the site selection process for two more of these centers for people experiencing increased stress and symptoms from mental health and substance use concerns.
- Awarded grants to three regional opioid treatment providers to expand access to medication-assisted treatment options in the northern tier of the state.
- Trained clinicians and prescribers on medication-assisted treatment for opioid use disorders.
- Collaborated with Department of Justice to provide training on the Wisconsin Treatment Court Standards to more than 500 representatives from treatment court teams.

Location

1 W. Wilson Street
Madison, WI 53703

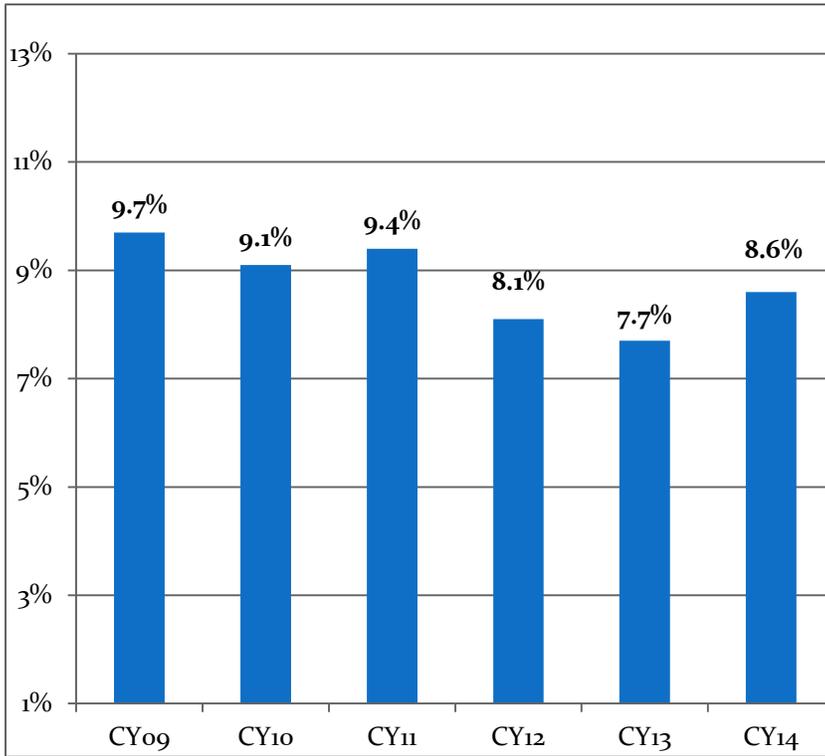
Director

Joyce Allen, M.S.W.

Number of Employees

45.5 FTE

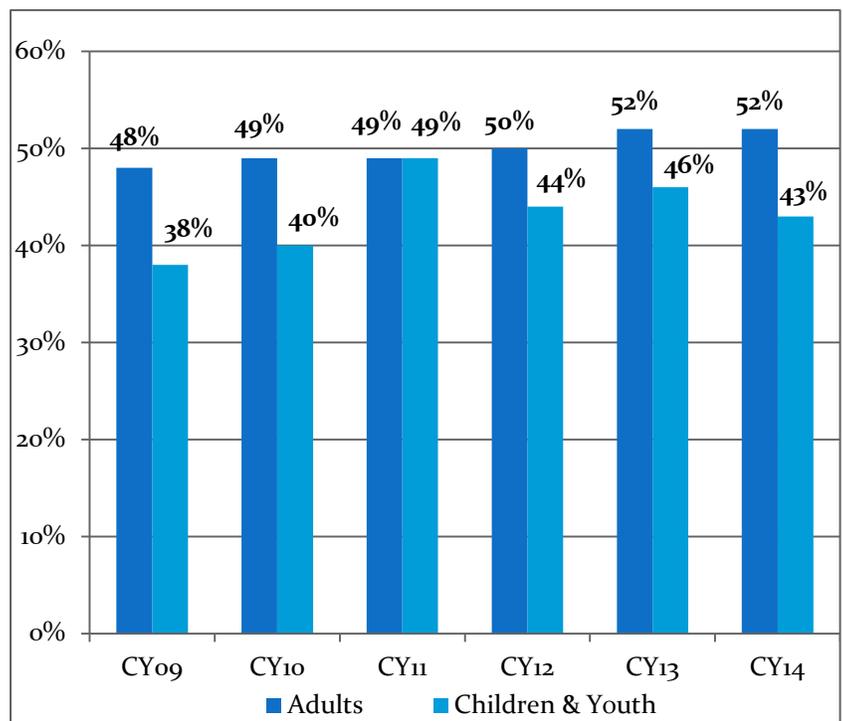
Quality Indicator: Percentage of psychiatric hospital patients readmitted within 30 days of discharge



Many factors affect this rate, which measures the effectiveness of treatment in fostering recovery, discharge planning, and continuity of care planning. However, many counties have successfully implemented change agents into their mental health systems that should contribute toward reducing readmissions. Examples include: reducing wait time between hospitalization and outpatient services, conducting “warm” handoffs to the next level of care, calling within three days of discharge, and ensuring patients have a finalized discharge plan prior to their discharge. The 2014 national average for this quality indicator was 13.4 percent.

Quality Indicator: Percentage of county-authorized persons completing substance use disorder treatment

Many outpatient treatment providers are using The Center for Health Enhancement Systems Studies at UW-Madison and its Network for the Improvement of Addiction Treatment (NIATx) quality improvement model to increase the rate of clients continuing in treatment or completing treatment. These treatment providers are testing changes in their operations, including: addressing the counselor-client bond, using appointment reminder calls, addressing clients’ attendance barriers, contacting no-shows as soon as possible, and discussing issues and reengaging clients, if needed. The most recent national average for this quality indicator (2011) for adults was 39 percent.



Office of Community Forensic Services

The Office of Community Forensic Services manages and supports programs for individuals with criminal justice histories and mental health concerns. This work is performed in partnership with Wisconsin's judicial, correctional, and mental health systems. These programs include the Conditional Release Program, Court Liaison Services Program, Opening Avenues to Reentry Success (OARS) Program, Outpatient Competency Examination Program, and Outpatient Competency Restoration Program.

2015 Year in Review

- Partnered with staff at Mendota Mental Health Institute and Winnebago Mental Health Institute to develop and co-facilitate weekly meetings in the treatment areas at the facilities to promote the Conditional Release Program and assist patients to prepare for life in the community.
- Expanded OARS to Green, Iowa, Jackson, La Crosse, Marinette, Monroe, Rock, Oconto, Trempealeau, Sauk, and Vernon counties.
- Increased the number of outpatient competency evaluations by working to engage defendants who initially refuse outpatient services.
- Developed a process to increase the number of defendants whose mental illness is stabilized at a mental health institution and transferred to the outpatient competency restoration program.
- Expanded the outpatient competency restoration program to Buffalo, Eau Claire, Jackson, Pepin, Pierce, and Trempealeau counties.
- Authorized the use of psychological testing for competency evaluations in jail settings to avoid the need for inpatient evaluation services.



Location

1 W. Wilson Street
Madison, WI 53703

Director

Glenn Larson

Number of Employees

6.5 FTE

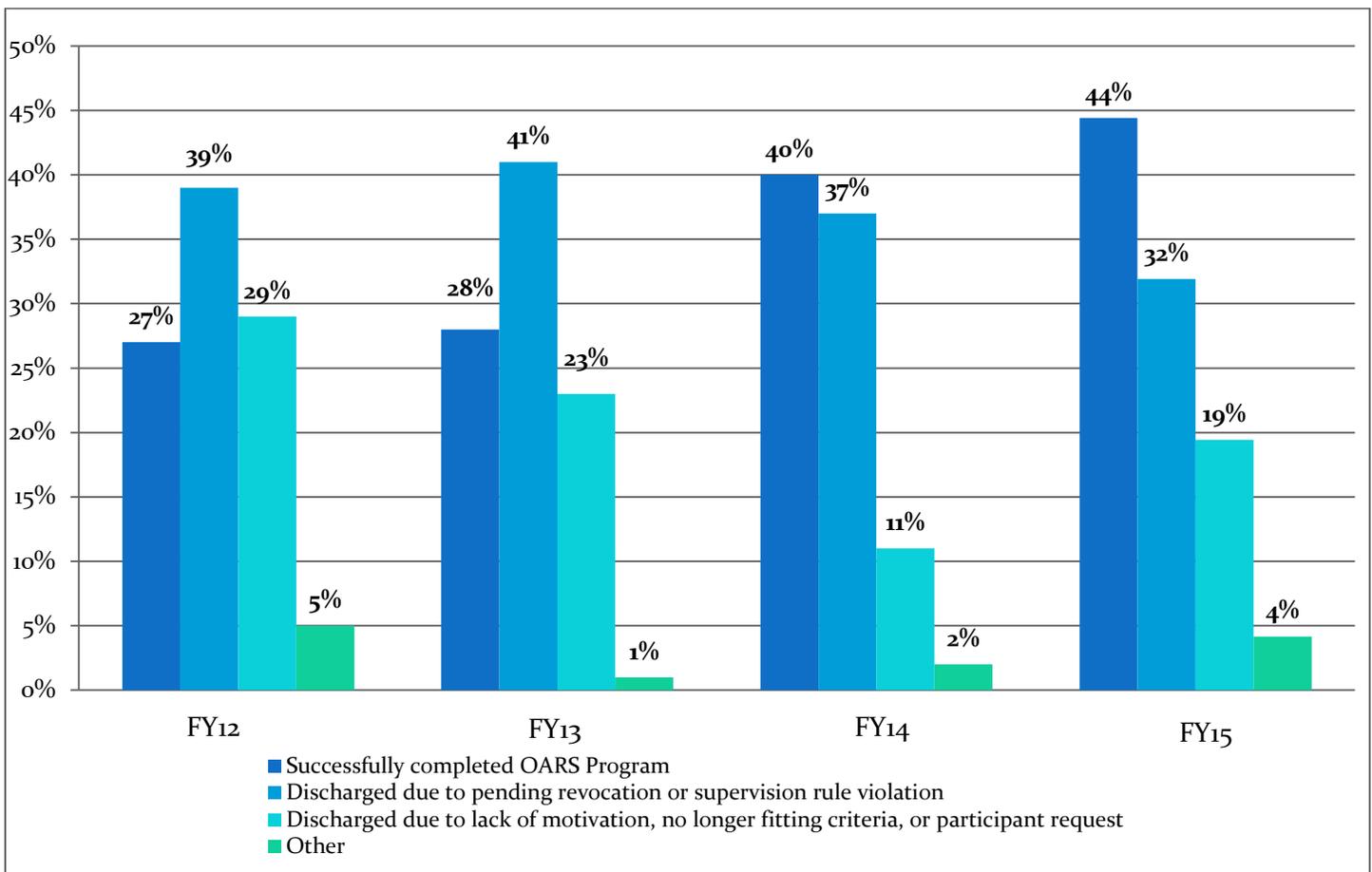
Quality Indicator: Number of revoked conditional release clients from state mental health institutes



In FY15, 57 of the 437 clients who were on conditional release were revoked. Twenty-two of these clients transitioned into the community from one of the state’s two mental health institutions. Many factors affect this number, including clients resisting treatment, clients experiencing increased stress or symptoms of mental health and substance use concerns, and the client’s inability to deal with daily tasks. This measure is part of an annual analysis of the contributing factors on each revocation case. This analysis not only helps to guide institutional care and treatment, it also suggests programmatic

enhancements for at-risk patients and provides opportunities for continuum of care strategies between the mental health institutions and the Conditional Release Program to enhance community safety.

Quality Indicator: OARS completions and discharges



This is a measure of the treatment, case management, and support provided to clients. OARS staff engage clients who show reduced desire to complete the program with motivational interviewing and person-centered plans.

Mendota Mental Health Institute

Mendota Mental Health Institute, which opened in 1860, primarily serves men for court-related mental health evaluations, treatment to competency services, and treatment for those found not guilty of criminal activity by reason of mental disease or defect. A geropsychiatric treatment unit assesses and treats elderly men and women who suffer from emotional and neurological conditions that affect behavior, including Alzheimer's disease. The **Mendota Juvenile Treatment Center** uses a unique clinical-correctional model to serve violent juveniles referred from the Department of Corrections.

2015 Year in Review

- Developed telepsychiatry services and successfully piloted service delivery with two county health service programs, the Tri-County Region, including Forest, Oneida, and Vilas counties, and Adams County.
- Developed telemedicine option for inpatients needing appointments with UW Health/University Hospital, reducing security risks and costs for transporting patients.
- Opened a new patient learning center to support patients' successful transition to the community.
- Enhanced security measures across campus.
- Developed a medication reconciliation database to promote patient medication safety consistent with The Joint Commission standards.
- Became a pilot organization in The Joint Commission Center for Transforming Health Care Preventing Falls Targeted Solution Tool to assist in developing fall risk reduction best practices and promote patient safety.
- Received a staff injury reduction grant from the Department of Administration's Bureau of State Risk Management and expanded sensory modulation programming options on units with highest rates of staff injury due to patient aggression. Sensory modulation programming is designed to provide patients with additional tools for self-regulation rather than relying on restrictive measures such as seclusion or restraint.
- Provided training to national and international audiences on The Program of Assertive Community Treatment (PACT) community-based treatment model for individuals with severe and persistent mental illnesses.
- Provided consultation to several states regarding the Mendota Juvenile Treatment Center model of care in the treatment of violent juveniles.



Location

301 Troy Drive
Madison, WI 53704

Director

Greg Van Rybroek, Ph.D., J.D.

Number of Employees

769.8 FTE

Number of Beds

274 (Psychiatric Hospital)

29 (Juvenile Treatment Center)

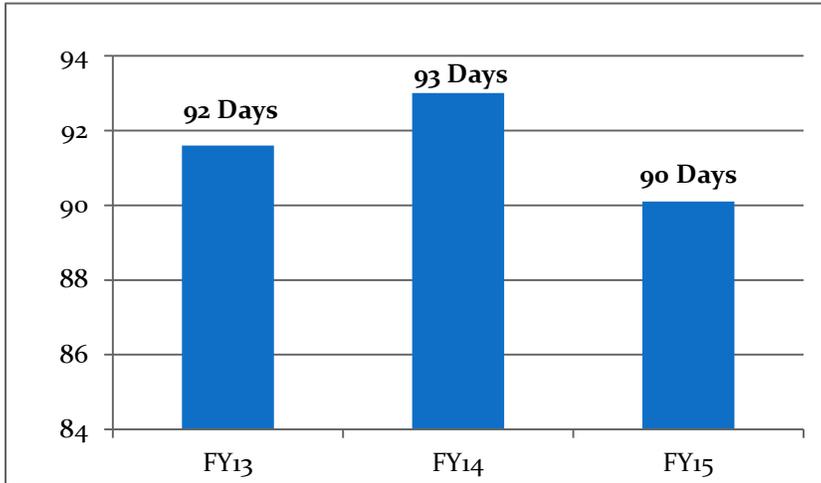
Average Daily Population

267 (FY15, Psychiatric Hospital)

29 (FY15, Juvenile Treatment Center)



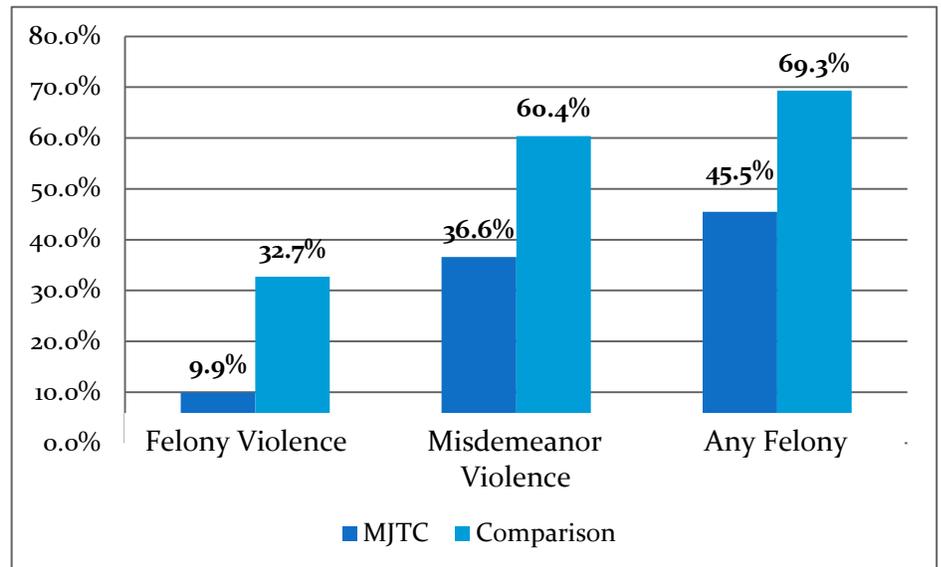
Quality Indicator: Average length of stay for treatment to competency



The number of referrals for treatment to competency services has been increasing for many years. Providing these services in an expeditious manner reduces the period of time individuals in need of these services wait to be transferred from county jails.

Quality Indicator: Recidivism rates for former Mendota Juvenile Treatment Center patients

A recent study compared 101 youth who had been treated at Mendota Juvenile Treatment Center to 101 youth who had been assessed on Mendota Juvenile Treatment Center, but treated elsewhere. Over a five-year follow-up significantly fewer of the Mendota Juvenile Treatment Center-treated youth committed new offenses.



Winnebago Mental Health Institute

Winnebago Mental Health Institute, which opened in 1873, primarily serves adults and children with symptoms of severe and persistent mental illness who are court-ordered into treatment. Services are also provided to individuals, primarily women, in need of court-related mental health evaluations, treatment to competency services, or found not guilty of criminal activity by reason of mental disease or defect.



2015 Year in Review

- Accepted a record number of admissions, more than 3,000.
- Increased access for admissions and insurance services to accommodate admissions occurring after business hours and on weekends.
- Created patient discharge protocols to promote linkage with community resources to help reduce readmissions.
- Researched and implemented sanctuary and sensory rooms as a means of providing trauma-informed care to youth and developmentally disabled patients.
- Increased video conferencing capability, allowing more patients to attend court hearings at the facility without the cost and risk of transportation outside the hospital.
- Piloted use of cell phones and laptops to increase staff efficiency and flexibility.
- Introduced a customer service training initiative designed to improve staff interactions with internal and external customers, including patients and their families, other visitors, counties, courts, and partner agencies.
- Strengthened the suicide risk assessment process through the use of the Columbia Suicide Severity Rating Scale.
- Applied improved anti-climb mesh to perimeter fencing to reduce elopement risk.
- Updated the Incident Support for Employees Program to better assist employees who are injured while working with patients.
- Upgraded fixtures in all buildings, including flooring, lighting, countertops, door locks, and outlet covers to improve patient and staff safety and security.
- Completed a water reservoir project to provide a source of water if access to the city water supply is lost.

Location

1300 South Drive
Winnebago, WI 54985

Director

Thomas Speech, Ph.D.

Number of Employees

634.3 FTE

Number of Beds

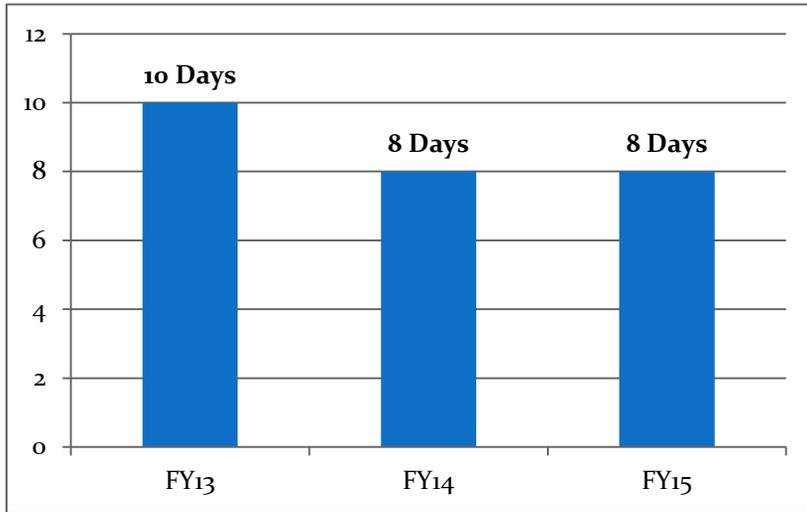
184

Average Daily Population

189 (FY15)



Quality Indicator: Average length of stay for civil patients



This is a measure of efforts to reduce lengths of stay for civil patients placed at the Winnebago Mental Health Institute. Patients who are able to return to the community more quickly after psychiatric hospitalization have a greater chance of avoiding future hospitalizations. Additionally, since treatment in an inpatient setting is significantly more costly than community care, shorter lengths of stay reflects more effective use of health care resources.

Wisconsin Resource Center

The Wisconsin Resource Center (WRC) opened in 1983 as a specialized mental health facility for men. The complex also includes the Wisconsin Women's Resource Center (WWRC), which opened in 2011. The Department of Health Services is responsible for administering the center as a correctional institution that provides psychological evaluations and treatment, specialized learning programs, and supervision of medium and maximum security inmates, transferred from the Department of Corrections whose behavior presents a serious problem to themselves or others in state prisons.

2015 Year in Review

- Opened a new visitor center that includes a new space for religious services for inmates and space equipped with video conference technology, which allows inmates to participate in court hearings at the facility without the cost and risk of transportation outside the facility.
- Added a room to the gatehouse for families to visit with inmates by video conferencing.
- Added cameras to the video surveillance system throughout the center to ensure the safety and security of inmates and staff.
- Improved approaches to control unsafe inmate behavior with the least restriction feasible through facility improvements, new equipment, and new intervention methods.
- Implemented Managing Anger and Violence Program in the maximum custody service area to help inmates with coping skills, relationships, social interactions, and anger.
- Provided treatment to competency services to 30 individuals, a 43 percent increase over the previous year.
- Provided training to the Department of Corrections in methods to manage risks of inmate suicide and self-harm risks. In FY15, staff handled 324 incidents in these categories without loss of life.
- Held four "Give Back" events in which staff and inmates came together to support the community outside of the facility, including a fundraiser for Crime Victim Awareness Week in which inmates raised nearly \$500.
- Implemented a computer-based scheduling program for inmate health care services and off-site transportation to better control inmate movement on and off grounds.
- Implemented on-site electroencephalogram and speech therapy services, which is more efficient and safer than transporting patients for services in the community.



Location

1505 North Drive
Winnebago, WI 54985

Director

Byran Bartow, M.P.A.

Number of Employees

524.6 FTE

Number of Beds

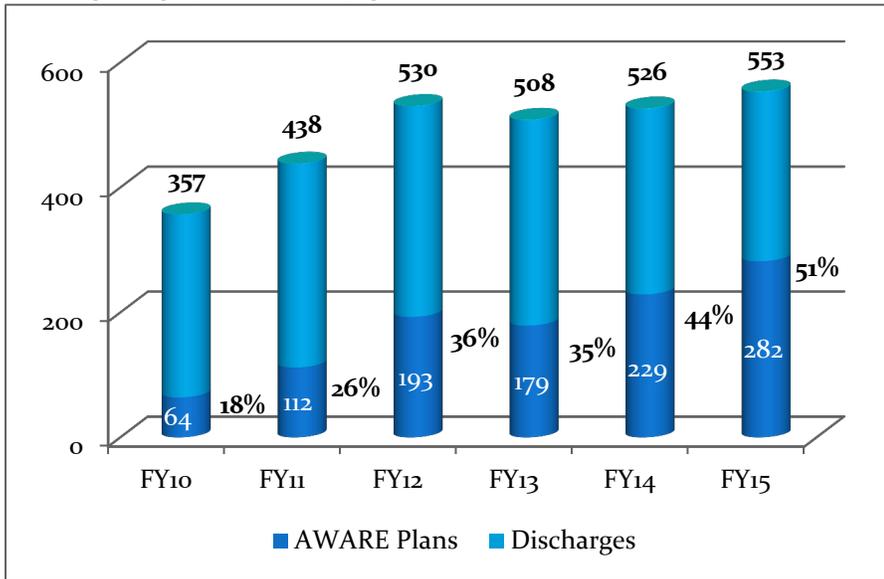
385

Average Daily Population

374 (FY15)



Quality Indicator: Discharges with Achieving Wellness and Recovery Everyday (AWARE) plans



This is a measure of how many individuals are taking ownership of their behavioral health to experience greater wellness and recovery. Increasing the number of inmates completing AWARE plans remains a priority for the Wisconsin Resource Center. AWARE facilitators at the Wisconsin Resource Center are meeting with individuals with severe mental illness and encouraging them to participate in the development of a plan. Planning groups are available for inmates.

Sand Ridge Secure Treatment Center

Sand Ridge Secure Treatment Center houses Wisconsin's Sexually Violent Persons Program. It opened in 2001 as the facility for the evaluation and care of individuals detained and committed under Wis. Stat. ch. 980. Staff use evidence-based practices to make Wisconsin a safer place by reducing the level of sexual violence in society. Staff also manage the Supervised Release Program.



2015 Year in Review

- Completed a reorganization to focus more positions on patient treatment and ancillary services.
- Moved more patients into the highest phase of treatment, Phase Three, which is reserved for those patients showing the most progress in treatment.
- Focused on improving the physical health of patients, which included a weight loss contest in which patients lost a total of 700 pounds through healthy eating and exercise.
- Expanded the facility garden and harvested and processed more than 5,000 pounds of produce for patient meals.
- Opened a second Transitional Living Unit for patients who are approved for release into the community. This unit is for patients in need of assessment and assistance with preparing for their release and transition into the community. These units are intended to assist patients in the development of independent living skills.
- Complied with an increasing number of court orders to place patients on Supervised Release. However, there were challenges in community placement in some of these cases in part because of the increasing number of local ordinances that restrict where sex offenders may live.
- Offered patients who were approved for Supervised Release, but were waiting community placement, the opportunity to work in three custodial and landscaping positions outside of the secure perimeter of facility. The program provides patients an opportunity to develop skills outside the confines of the facility under minimal staff supervision. It also gives staff an opportunity to observe patients in an everyday work environment, as opposed to the more clinical environment that exists inside the facility.

Location

1111 North Road
Mauston, WI 53948

Director

Deb McCulloch
(Resigned November 13)
Doug Bellile
(Acting Director)

Number of Employees

527 FTE

Number of Beds

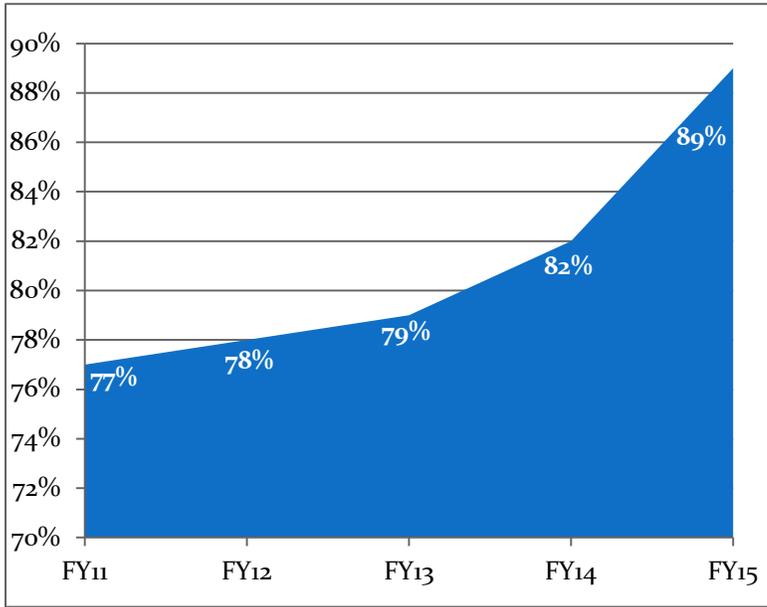
400

Average Daily Population

362 (FY15)



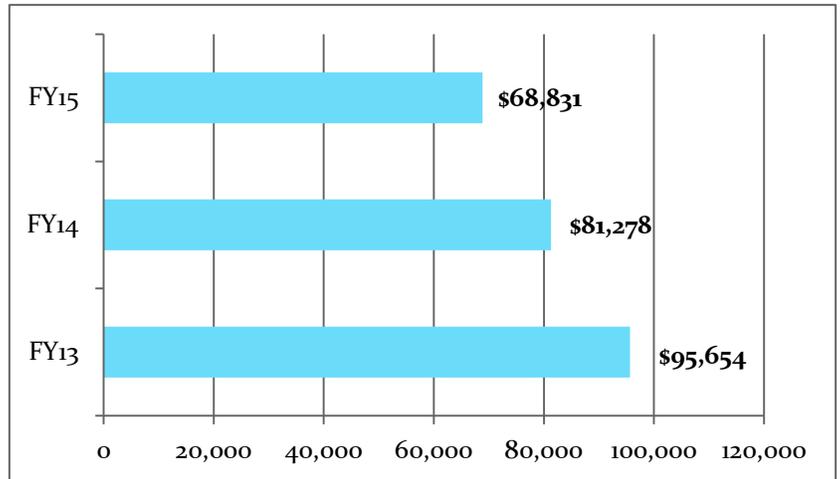
Quality Indicator: Rate of patients participating in treatment



Involvement in treatment is a critical factor in effectively reducing risk of sexual violence. In an attempt to continue the positive trend in this metric, the majority of new admissions are now assigned to a specific treatment unit for an orientation period, typically an advance treatment unit. Consent to treatment procedures have been modified to allow patients to participate in treatment programming that is not sex offender treatment specific. Biweekly meetings grounded in Motivational Interviewing are held with pre-treatment patients. The goal is to increase this rate by 5 percent each year.

Quality Indicator: Average annual cost of care per Supervised Release client

While the number of Supervised Release placements increased in FY15, the average annual cost of care per client decreased in part because of a continued focus on internal cost controls and double-occupancy placements. Additionally, more clients are contributing to the cost of their care as a result of participating in benefit programs and/or employment. The goal is to keep the average annual cost of care under \$80,000.



Client Rights Office

Client Rights Office staff work collaboratively with individuals receiving services for mental illness, developmental disability, or substance use; service providers; and facilities operated by the Department of Health Services, to ensure that client rights are preserved. A four-stage grievance process exists to ensure rights are protected. Stages 1 and 2 involve staff at the facility/service provider level. Stages 3 and 4 involve staff in the Client Rights Office and the DMHSAS Administrator.



2015 Year in Review

- Reconstructed the Client Rights Office website to ensure that it conveys information clearly and concisely for consumers, providers, and the general public.
- Compiled a training manual for new Client Rights Facilitators in facilities operated by Department of Health Services.
- Developed standard training materials for community presentations to ensure that client rights are implemented consistently in all settings.
- Provided online training to 234 client rights specialists to ensure the people who handle Stage 1 complaints are properly certified.
- Reviewed research studies involving participants covered by client rights. These reviews involved an analysis of whether the studies complied with state and federal law. Changes were requested in many instances to protect client rights.
- Committed to a process for Informed Consent for Psychotropic Medication forms to be reviewed and updated by Department of Health Services staff at regular intervals to ensure that current and accurate medical information is communicated to those who use the forms.

Location

1 W. Wilson Street
Madison, WI 53703

Supervisor

Alicia Boehme, M.S.W, M.P.A.

Number of Employees

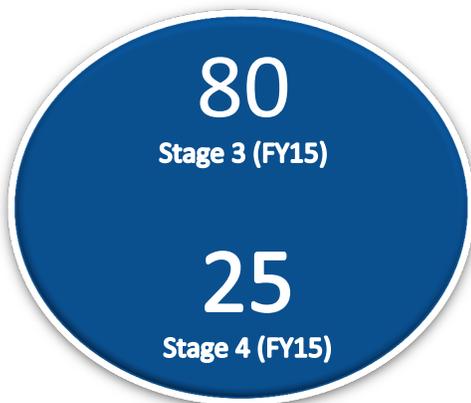
2.9 FTE

Quality Indicator: Phone calls for technical assistance



The State Grievance Examiner conducted a pilot in 2015 to track the number of phone contacts the Client Rights Office had with clients and providers based in community settings. This is one measure of the quantity of technical assistance provided annually by the Client Rights Office.

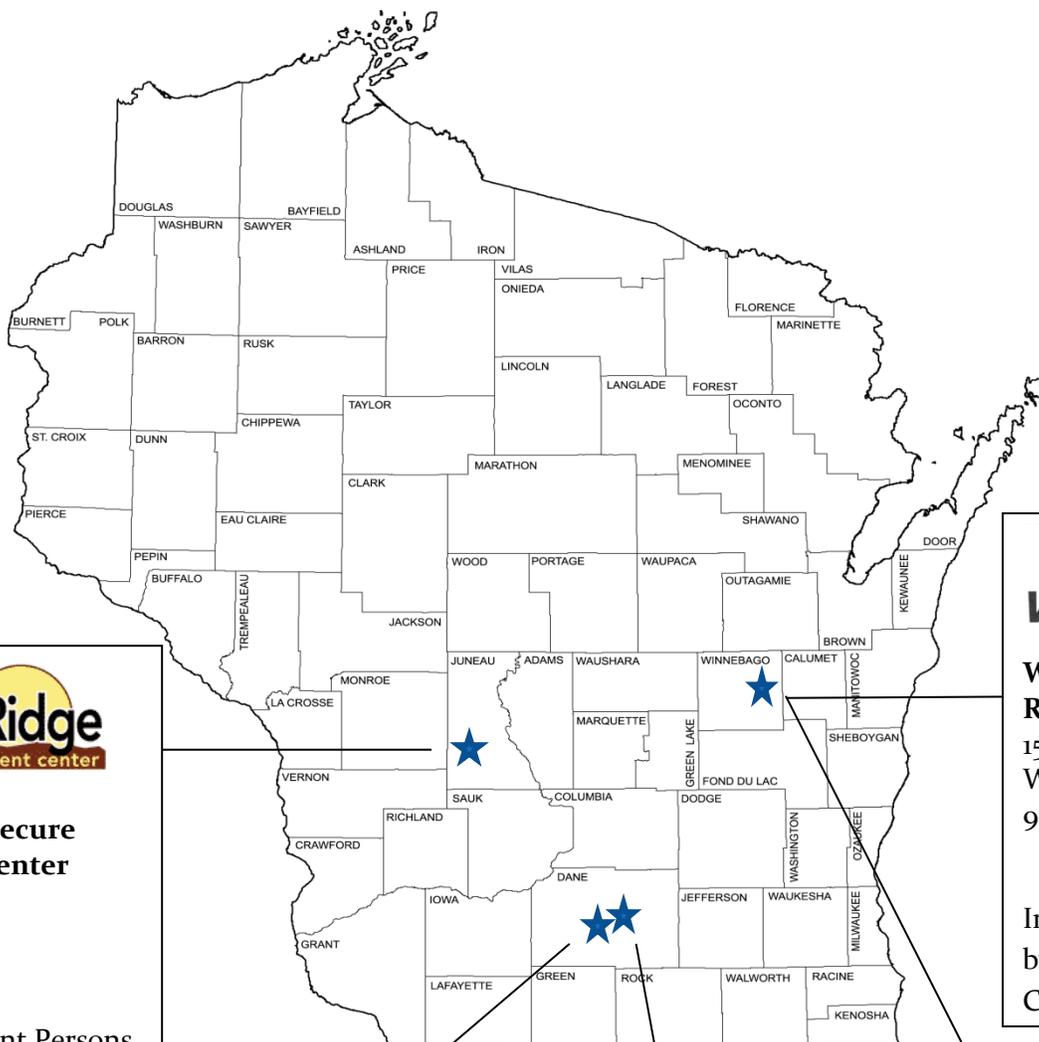
Quality Indicator: Number of Stage 3 and Stage 4 grievances investigated



Patients have the right to appeal any grievance decision. The Client Rights Office's objective is to ensure that clients are informed of their appeal rights. The relatively low number of appeals to Stage 3 and Stage 4 in relation to the total number of grievances filed reflects the quality of the process to resolve all of the issues that can be settled before the appeals process is exhausted.

Location Map

This map shows the locations of DMHSAS offices and facilities and their major service area(s).




Sand Ridge Secure Treatment Center
 1111 North Rd.
 Mauston, WI
 608-847-4438
 Sexually Violent Persons



Wisconsin Resource Center
 1505 North Dr.
 Winnebago, WI
 920-426-4310
 Inmates referred by Department of Corrections



Central Office
 1 W. Wilson St.
 Madison, WI
 608-266-2717

- Administration
- Bureau of Prevention Treatment and Recovery
- Client Rights Office
- Office of Community Forensic Services



Mendota Mental Health Institute
 301 Troy Dr.
 Madison, WI
 608-301-1000
 Forensic Patients, Men



Winnebago Mental Health Institute
 1300 South Dr.
 Winnebago, WI
 920-235-4910
 Civil Patients
 Forensic Patients, Women