

Division of Care and Treatment Services

**2018
ANNUAL
REPORT**

Wisconsin Department of Health Services

Our work

The Division of Care and Treatment Services manages and supports community mental health and substance use services, community programs for people with histories of criminal offenses and mental health and substance use concerns, seven care and treatment facilities, and the protection of client rights for individuals receiving services for a developmental disability, mental health, and substance use.

Our vision. Everyone living their best life

Our mission. To improve the quality of life for individuals and communities by promoting hope, health, and healing

Our values.

- Dignity and respect
- Compassion and well-being
- Safety and support
- Trust and teamwork

Our budget. \$480,008,500 (State fiscal year 2018: July 1, 2017-June 30, 2018)

Our team. 4,022.88 staff (Full-time equivalent employees as of December 3, 2018)

Our best, every day

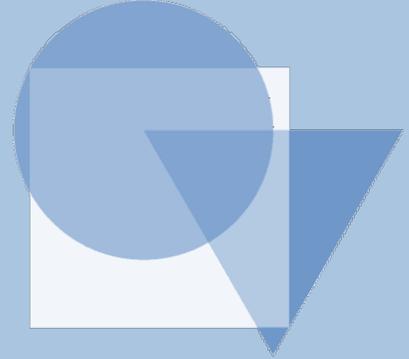
It is our pleasure to present the achievements and efforts of the Division of Care and Treatment Services for 2018.

We support Wisconsin's most vulnerable residents. The people we serve live with their families or independently; some are served in hospitals, centers, jails, or prisons and others in residential programs, foster care, or group homes. Each year, at our seven facilities and through collaborative partnerships with other state agencies, 72 counties, 11 federally recognized tribes, and hundreds of community-based service providers, we give tens of thousands of children, adults, and families in communities across the state the opportunity to live their best life.

That's our vision, and thanks to a dedicated team of staff and partners, we've made great progress in making this vision a reality. Thank you for your ongoing support.

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

Holly Audley, M.A.
Assistant Administrator



Our offices and bureaus

Administrator's Office. This office determines the direction for all programs and services.

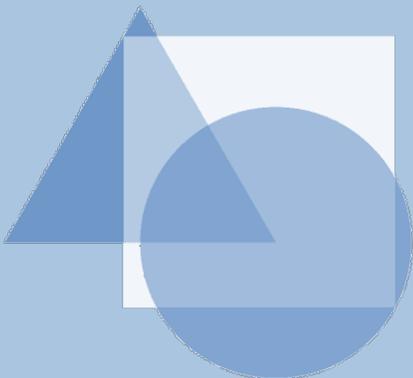
Office of Budget and Operations. This office manages fiscal matters, policy analysis, and information technology for all work units.

Office of Electronic Health Records Systems Management. This office oversees the development, implementation, and maintenance of DHS Connect, the electronic health records system for Central Wisconsin Center, Mendota Mental Health Institute, Northern Wisconsin Center, Sand Ridge Secure Treatment Center, Southern Wisconsin Center, Winnebago Mental Health Institute, and the Wisconsin Resource Center.

Client Rights Office. This office protects and promotes the dignity and respect of people receiving services for a developmental disability, mental illness, or substance use disorder.

Bureau of Community Forensic Services. This bureau promotes healthy living and protects public safety through the management and support of programs for people with histories of criminal offenses and mental health and substance use concerns.

Bureau of Prevention Treatment and Recovery. This bureau protects and promotes overall wellness through the management and support of community mental health and substance use services for people of all ages and backgrounds.



Our facilities

Central Wisconsin Center

- Health, assessment, treatment, and rehabilitation services for people with intellectual disabilities.
- Average monthly population: 204

Mendota Mental Health Institute

- Psychiatric care and treatment services for people referred by county agencies and courts.
- Average daily population: 281

Northern Wisconsin Center

- Assessment and treatment services for people with intellectual disabilities and behavioral health needs.
- Average monthly population: 14

Sand Ridge Secure Treatment Center

- Treatment services for people committed under Wisconsin's Sexually Violent Persons Law.
- Average daily population: 328

Southern Wisconsin Center

- Health, assessment, treatment, and rehabilitation services for people with intellectual disabilities.
- Average monthly population: 133

Winnebago Mental Health Institute

- Psychiatric care and treatment services for people referred by county agencies and courts.
- Average daily population: 171

Wisconsin Resource Center

- Specialized treatment services for people with severe and persistent mental health needs referred by the Department of Corrections and the courts.
- Average daily population: 375

The average daily or monthly population for fiscal year 2018 (July 1, 2017-June 30, 2018) was derived by taking an average patient population across all times of day and night or the month—numbers that often vary greatly. The figure for Mendota Mental Health Institute does not include the population at the Mendota Juvenile Treatment Center, a secure treatment facility for juveniles referred by the Department of Corrections. The average daily population for the Mendota Juvenile Treatment Center was 28.

Our year

Responding to the opioid crisis. About \$19 million in federal and state funding boosted the efforts of the **Bureau of Prevention Treatment and Recovery** to address Wisconsin's opioid crisis. This included about \$15 million in seven grants from the

1,400+

Number of individuals served by opioid treatment and recovery services supported by federal and state grants.

federal Substance Abuse and Mental Health Services Administration and \$4 million under the state's Heroin, Opioid, Prevention, and Education (HOPE) Agenda. These funds supported 73 opioid abuse prevention coalitions; training for 11,249 individuals on how to use naloxone, with 1,648 opioid overdoses reversed statewide; unmet opioid treatment needs in 18 counties and five tribal nations; new opioid treatment options in three counties and one tribal nation; five regional

opioid treatment centers; treatment for inmates at 17 county jails; and programs providing recovery coaches to ensure success. These funds also supported the launch of the Wisconsin Addiction Recovery Helpline for the public (Call 211 or 833-944-4673) and the UW-Madison Addiction Consultation Provider Hotline (Call 800-472-0111). Providers also had the opportunity to receive this support through the Wisconsin Opioids Project ECHO, a free monthly videoconference series. Two conferences for professionals were held. Wisconsin's Opioid Crisis: A Trauma-Informed Response focused on trauma's role in the misuse and abuse of opioids. More than 200 people attended. The Opioid Forum focused on best practices to save lives. More than 500 people attended.

Changing the conversation on meth. The Alliance for Wisconsin Youth, which is managed by the **Bureau of Prevention Treatment and Recovery**, partnered with the Department of Justice and Marshfield Clinic Health System to prevent Wisconsin residents from using methamphetamine and encourage people addicted to methamphetamine to seek treatment. The KNOW METH campaign targeted the 35 counties in Wisconsin where methamphetamine use is most prevalent. It included a website, fact sheets, and digital, print, radio, and television ads.

**KNOW
METH**

Our year

Opening new units. The **Wisconsin Resource Center** opened two 29-bed units to serve medium and minimum security inmates in need of substance use disorder treatment referred by the Department of Corrections. Staff offer group and individual treatment using two models proven to produce positive effects: Cognitive-Behavioral Interventions for Substance Abuse and Thinking for a Change. The inmates also participate in group sessions on parenting and mindfulness. Upon successful completion of the 18-week program, the inmates return to the Department of Corrections to complete their sentence and prepare for release.

58

Number of inmates with substance use disorders who can be served at one time in a new program at the Wisconsin Resource Center

Modernizing health records. **Winnebago Mental Health Institute** became the first facility to implement DHS Connect, an electronic health records system developed by the **Office of Electronic Health Records System Management** in partnership with the Cerner Corporation. It supports key operations, including registration; admission; assessment; treatment planning, delivery, and review; order management; medication management; and discharge. The first go-live followed over three years of work by staff at all seven facilities managed by the Division of Care and Treatment Services. This



work included identifying requirements for a single, integrated system for all facilities; selecting a supplier; developing the program; and completing infrastructure upgrades to accommodate new technologies. DHS Connect replaces a system of paper records supplemented by various electronic applications.

Our year

Offering an alternative to revocation. The **Wisconsin Resource Center** expanded the Mental Health Alternative to Revocation Program to include women released from custody under supervision who are struggling to manage the symptoms of their mental illness in the community. Staff help clients develop healthy coping skills and make positive choices that incorporate wellness and recovery. The goal is to give clients the tools to live independently in the community rather than in a restricted housing environment.

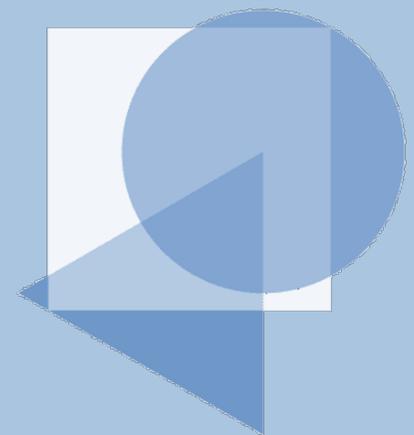
Enhancing mental health crisis response. Staff from the **Bureau of Prevention Treatment and Recovery** sponsored a series of discussions with public and private behavioral health agencies focused on crisis intervention and emergency detention. This group discussed strategies to support people experiencing a mental health crisis in the community rather than sending them to a psychiatric hospital. These strategies were highlighted in the Toolkit for Improving Crisis Intervention and Emergency Detention Services, P-02224, posted to the website of the Department of Health Services. A one-time grant program to promote these best practices was created. Quality improvement grants valued at \$20,000 each were awarded to 15 county agencies.



Our year

Promoting dignity and respect. The **Client Rights Office** investigated more than 100 grievances from clients and patients regarding treatment and records privacy and access. As required by state law, staff reviewed research proposals involving people receiving services for developmental disabilities, mental health, and substance use disorders to ensure the client rights of all participants were protected. Staff resumed coordination of an advisory committee charged with improving the care and treatment of clients and patients nearing end of life in Division of Care and Treatment Services facilities. Staff also hosted a meeting with the client rights facilitators of **Central Wisconsin Center, Mendota Mental Health Institute, Northern Wisconsin Center, Sand Ridge Secure Treatment Center, Southern Wisconsin Center, and Winnebago Mental Health Institute** to discuss client rights law as well as successes and challenges.

Improving patient care delivery. Organizational changes at **Winnebago Mental Health Institute** resulted in more medical staff and treatment providers assigned to evening and weekend shifts, the peak times for admissions. These changes improved the admissions assessment process and initiation of treatment. More treatment groups were offered in the evenings and on weekends. More individualized services were offered to patients whose needs were not met through group treatment.



Our year

Serving the criminal justice system. Wisconsin's two state mental health institutes handle mental health referrals from the criminal justice system. Both hospitals are using all available space to complete competency to stand trial evaluations, provide competency restoration, and care for and treat individuals found not guilty by reason

5

Number of additional agreements with county jails to begin competency restoration services in the jail while the individual awaits admission to a state mental health institute.

of mental disease or defect. **Mendota Mental Health Institute** transferred 17 patients found not guilty by reason of mental disease or defect to **Sand Ridge Secure Treatment Center**, which repurposed a vacant unit to house this population. These moves, combined with more competency evaluations performed in the community by a partner of the **Bureau of Community Forensic Services** and efforts to expedite court action on state mental health institute patients ready for discharge, opened up beds at the state mental health institutes for individuals waiting to be admitted. The

Wisconsin Resource Center provides competency restoration services for individuals under the supervision of the Department of Corrections.

Assisting victims of severe weather. Staff and patients at the **Sand Ridge Secure Treatment Center** filled more than 900 sand bags for people in the Mauston area to protect their property from summer floodwaters. The **Bureau of Prevention Treatment and Recovery** secured a grant from the Federal Emergency Management Agency for Wisconsin Emergency Management to support a program that employed outreach workers in the nine counties with the most flood and wind damage from several rounds of summer storms. This program helped people begin to rebuild their lives with crisis counseling and other support services.



Our year

Empowering peer support. The **Bureau of Prevention Treatment and Recovery** piloted a revised curriculum for peer specialists, individuals in recovery from mental health and/or substance use concerns taught how to help and educate people struggling to find their path to recovery. The updated curriculum offered through 26 training sessions around the state integrates knowledge and practices related to mental health and substance use. People from all backgrounds were trained, including three inmates from the **Wisconsin Resource Center**. The integrated certification exam was administered three times. Additionally, a new initiative to certify parent peer specialists began with the offering of two training sessions. Twenty parents were trained using a pilot curriculum. These parents have experience raising children with behavioral health challenges and want to use their experiences navigating services in support of other parents struggling to find services for their children. The exam was not administered in 2018.

233

Number of people who achieved a passing score on the new integrated exam for peer specialists and earned the title of certified peer specialist.

Helping the homeless. Following a competitive application process, the **Bureau of Prevention Treatment and Recovery** awarded grants to four agencies to assist homeless people with behavioral health needs in accessing disability benefit programs administered by the Social Security Administration. The SSI/SSDI Outreach, Access, and Recovery Program, known as SOAR, also promotes employment as a means to increase individual income.



Our year

Fostering independence. The **Bureau of Community Forensic Services** identified a need to better coordinate long-term services for clients that have limited ability to live independently due to developmental, emotional, and physical disabilities. A system was created to connect these clients with these supports.

Promoting trauma-informed care. Staff in the **Bureau of Prevention Treatment and Recovery** attended seven training workshops to learn ways to interact with internal and external customers in a way that fosters compassion and connection, key pieces of trauma-informed care. Staff at **Northern Wisconsin Center** developed a list of five rules for respectful interactions with coworkers, clients, and visitors. The rules were posted throughout the facility. To reduce psychological stress among patients on the Youth Services Unit, **Winnebago Mental Health Institute** opened rooms with soothing colors, textures, calming music, and tools for coping. These rooms provided another supportive environment for patients to heal and avoid re-traumatization. Staff at **Sand Ridge Secure Treatment Center** surveyed patients to gauge their satisfaction with treatment programs. One result of this effort was a new referral process to better match patients with trauma-sensitive services. At the **Wisconsin Resource Center**, the principles of trauma-informed care—safety; transparency and trustworthiness; choice; collaboration and mutuality; and empowerment—guided activities of the recovery committee for inmates and the peer support program for staff.

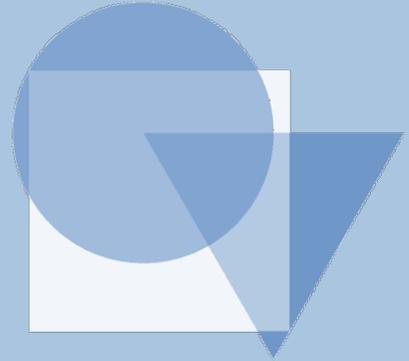
Increasing opportunities for residents. **Southern Wisconsin Center** added seven new programs at its Center for Resident Services Programs, including a gardening program and a gym program. All residents also enjoyed new evening and weekend clubs focused on art, horticulture, movies, and music. Nine additional long-term residents joined the MUSIC & MEMORY[®] program, which uses personalized playlists to boost the overall well-being of participants. Southern Wisconsin Center is a national leader in using this program to support the quality of life of people with intellectual disabilities. Paths in Hickory Grove were improved to allow golf carts and trams to drive through the woods. The fire pit and pavilion area is now accessible to people who use wheelchairs.

Our year

Enhancing resident care and treatment. **Central Wisconsin Center** implemented the initial phase of the Total Care Model in which resident care technicians and nurses work in coordination to support residents. Rehabilitation technicians and speech language pathologists developed a method to incorporate an acoustic massage device into the back of a wheelchair seating system. Software was deployed to allow individuals with limited mobility to use eye movements to access a computer. As a new host site for the Wisconsin Senior Employment Program, five people aged 55 years and older each worked 20 hours a week in support of treatment and leisure activities.

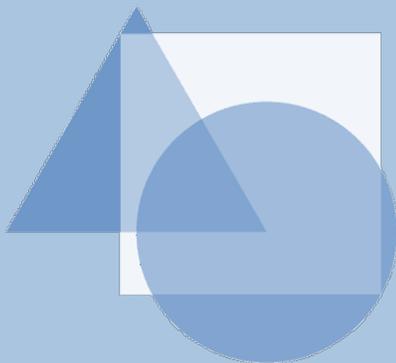
Building a culture of quality. The Change Leader Academy hosted 79 staff from the **Bureau of Community Forensic Services, Central Wisconsin Center, Sand Ridge Secure Treatment Center, Southern Wisconsin Center, Winnebago Mental Health Institute, and Wisconsin Resource Center.** The participants received training and support over six months to complete a quality improvement project. They worked individually and in groups to complete 35 projects to enhance day-to-day operations.

Developing a strong workforce. **Mendota Mental Health Institute** passed reviews by the American Psychological Association and the Accreditation Council on Continuing Medical Education to maintain the ability to offer internships and ongoing clinical education.

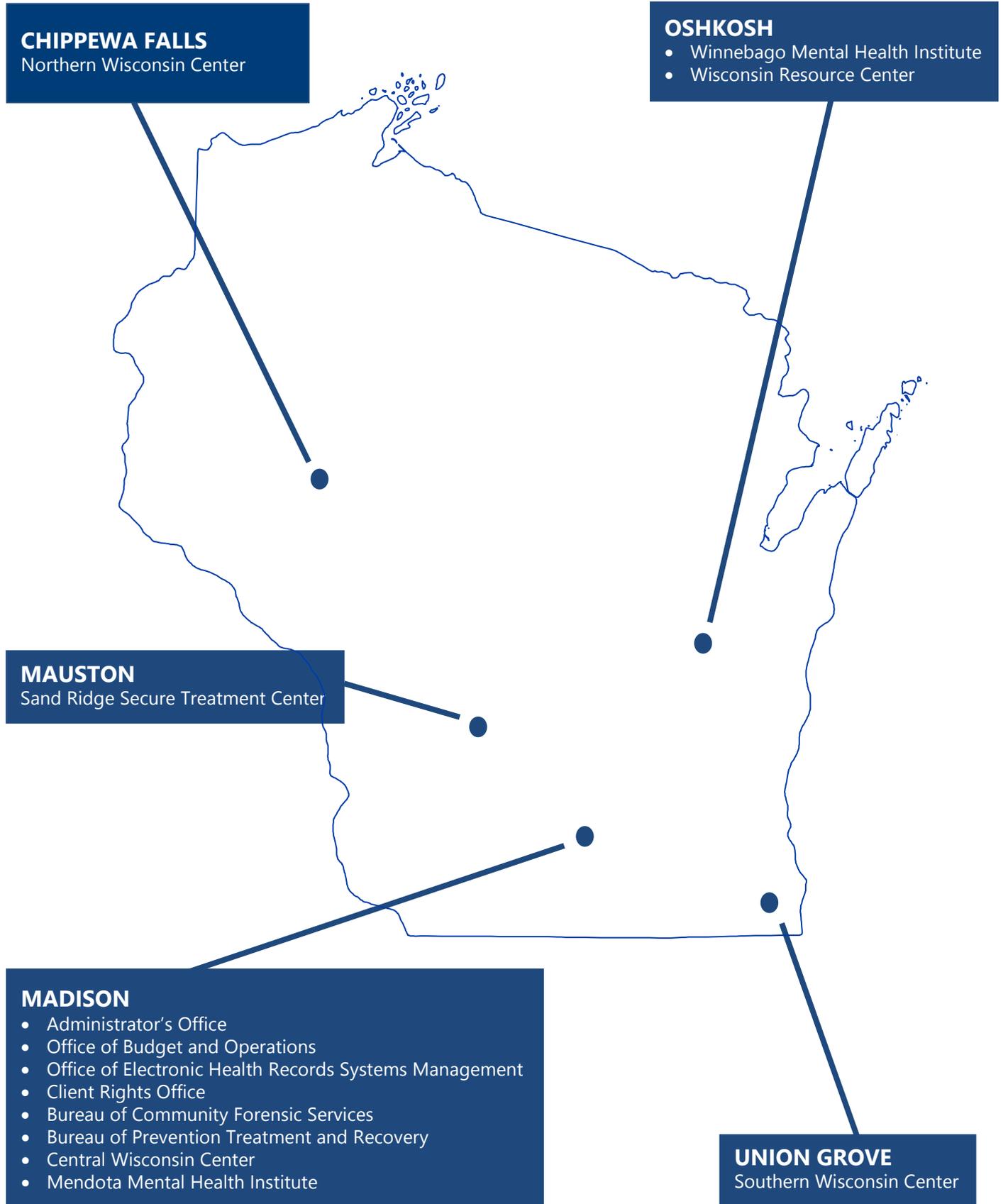


Our year

Supporting student success. The **Bureau of Prevention Treatment and Recovery** launched the Wisconsin Youth Treatment Initiative for youth and young adults with behavioral health needs. The three community partners in this program received training on how to deliver Multidimensional Family Therapy. **Northern Wisconsin Center** opened a sensory stimulation room at its Eagle's Nest School. The room has equipment that produces sounds, lights, vibrations, motion, and pressure to help students relax and focus. The Waterwood School at **Winnebago Mental Health Institute** enrolled 473 students, including 48 teens who collectively earned 90.5 high school credits. Staff at the Mendota Juvenile Treatment Center, a unit of the **Mendota Mental Health Institute**, started a work therapy program for patients. **Central Wisconsin Center** partnered with the Boys & Girls Club of Dane County's Advancement Via Individual Determination initiative to provide local high school students an opportunity to learn about people with disabilities. **Southern Wisconsin Center** provided internships to two culinary arts students from Shepherds College, a post-secondary education program in Union Grove for people with intellectual disabilities.



Our locations





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of **HEALTH SERVICES**

Division of Care and Treatment Services

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