

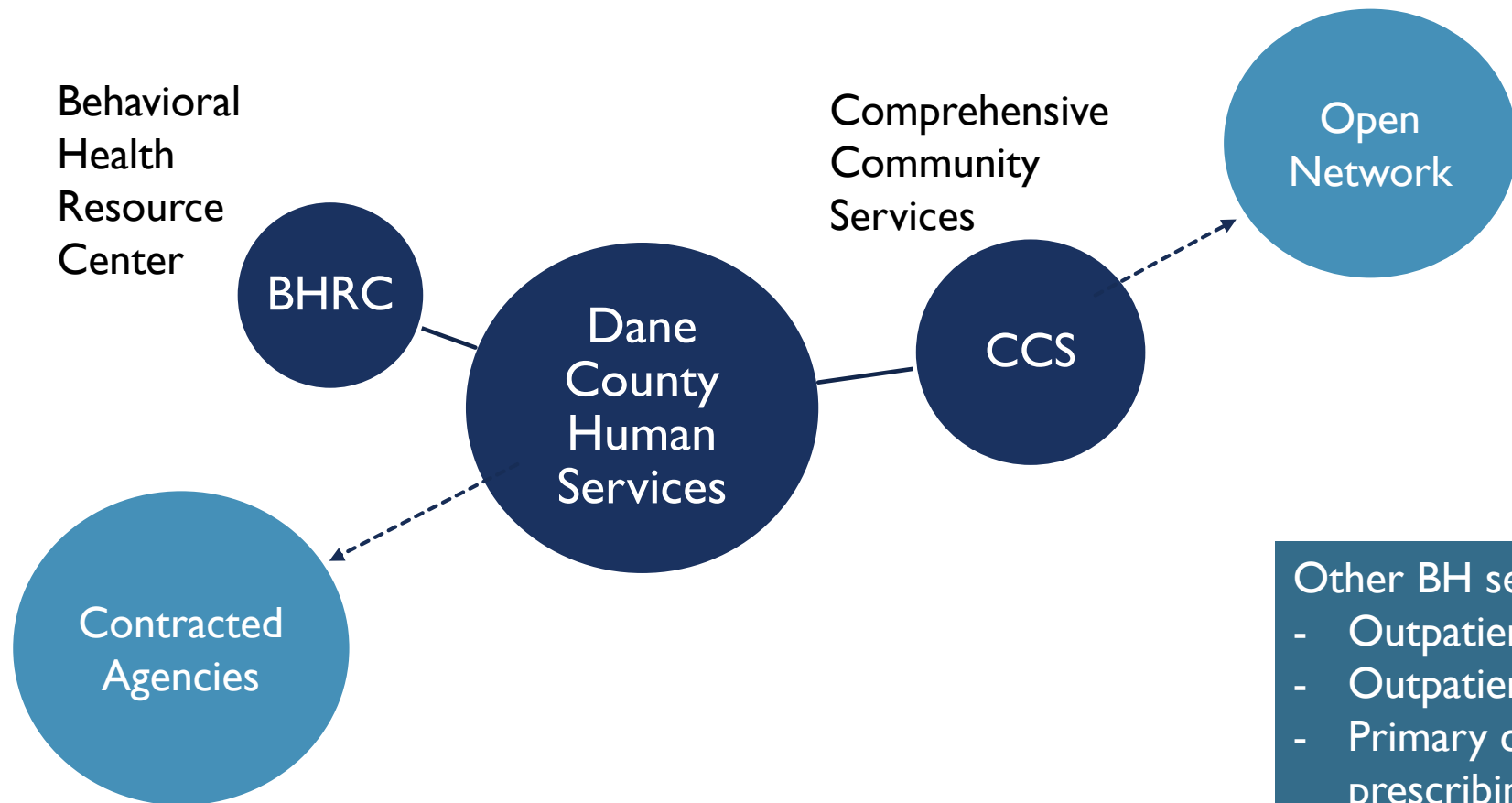
DANE COUNTY DEPARTMENT OF HUMAN SERVICES



BEHAVIORAL HEALTH DIVISION

Presentation to HSC Membership – 2/21/2023

HOW IS THE BH SYSTEM SET UP IN DANE COUNTY?



- Other BH services covered by MA, including:
- Outpatient MH therapy
 - Outpatient SUD treatment, including MAT
 - Primary care (may be able to do some prescribing)

NAVIGATING THE BH SYSTEM

The Behavioral Health Resource Center (BHRC) is a voluntary service designed to help people in Dane County access mental health and substance use services in Dane County, despite insurance status, financial status, age, identity, ability or legal status.

- ▶ **Email:** bhrc@countyofdane.com
- ▶ **Phone:** 608-267-2244, para español presione 2
- ▶ **Hours:** Monday-Friday, 7:45am-4:pm
- ▶ **Website:** <https://danebhrc.org/>





What We Do

- Provide resource and referral assistance based on the consumer's needs, provider preferences, insurance, barriers to accessing treatment, etc.
- Honor the consumer as the expert on their needs
- Function as a prevention service, connecting people to resources *before* they reach a point of crisis
- Offer short term Peer Support and Recovery Coaching to consumers who are on waitlists for treatment
- Offer follow up as long as it takes for the consumer to get connected to the right services
- Provide consultation and collaboration to concerned others and community based professionals
- Bridge systems of care by encouraging warm handoffs between agencies and organizations
- Advocate for consumers to receive the services that are clinically indicated and requested by the consumer

What We Do Not Do

- Replace services such as CCS Service Facilitation, Hospital Discharge Planning, case management services through other programs, etc.
- Provide detailed resource and referral information outside the scope of mental health and substance use services *unless* it is an identified barrier to accessing services
- Outreach consumers or persons of concern
- Offer intervention services
- Provide crisis care or replace services such as JMHC Crisis or the ER - we do work closely with these systems and will refer to both.

Warm Handoff:
calling with the individual on the line to connect them to the service.

Benefits:

- Establishes a shared understanding between the individual and agency about the services needed or recommended
- Reduces the number of times that the consumer has to tell their story
- Reduces the individual being “bounced around” between systems
- Models how to seek assistance and how to identify needs
- Models a team approach

SUPPORT IN A CRISIS

911

- If there is a life-threatening emergency or an immediate response is needed
- Likely to result in a law enforcement response, could result in an EMS, CARES, or Law Enforcement-embedded crisis response

988

- National crisis support service based on area code (WI Lifeline)
- Can receive calls, text, chat

All of these:

- Available 24/7/365
- Free and for anyone
- Insurance and residency do not matter
- Can be contacted about yourself or someone else
- *Could* result in a law enforcement response

608-280-2600

- Dane County's local crisis line
- Operated by the Journey Mental Health Center (JMHC) Emergency Services Unit (ESU) aka "Crisis"
- Funded through a contract with Dane County
- Best option if the call is about someone who may need involuntary treatment but is *not* having a life-threatening emergency right now

WISCONSIN STATUTES CHAPTER 51: EMERGENCY DETENTION AND INVOLUNTARY COMMITMENT

- Criteria Includes:
 - 1) The individual has a mental illness, developmental disability, or drug/alcohol dependence.
 - 2) The individual's illness / disability / dependence is treatable.
 - 3) The individual is dangerous to him/herself or others, due to the illness/disability/ dependence.
- Standards of Dangerousness need to be met
- Three methods for initiating the involuntary commitment process
 - **Law Enforcement Emergency Detention ← most common!**
 - Treatment Director Emergency Detention
 - Three Party Petition for Examination

Journey Mental Health Center is responsible for evaluating individuals for law enforcement emergency detention in Dane County

The specific parts of Chapter 51 that deal with emergency detention and involuntary commitment are [51.15](#) and [51.20](#).

Interested in learning more? Check out this [17-minute video training](#) on the topic.

RESIDENCY, PART I

All of the following:

1. Physical Presence: Is the person physically present?
2. Voluntary: Are they here of their own free will?
3. Intent to Remain: Do they intend to stay for the foreseeable future?
4. Fixed Place of Habitation: Have they established a permanent place to live?

Fixed place of habitation includes a house, apartment, condominium, or fixed mobile home wherein the individual owns the property, is on the lease, or has consent from the owner to live there for the foreseeable future.

Exclusions include temporary shelter, transitional housing, halfway house, motel/hotel, treatment or rehabilitation facility, dormitory, staying with family/friends on a temporary basis, doubled up, crashing on someone's couch, etc.

If a person is currently experiencing homelessness, residency is based on their most recent place of fixed habitation (most recent county of residency).

RESIDENCY, PART II

For what BH services is residency *not* required?

- Comprehensive Community Services (CCS) (see [DCTS Information Memo 2021-04](#))
- Other services covered by Medicaid, such as outpatient MH therapy, outpatient SUD treatment including MAT, etc)
- Emergency Services

For what services *is* residency required?

- All county-funded BH services other than Emergency Services (and CCS)

What does this mean in practice?

- Individuals who are not Dane County residents cannot be served under a program's contract with DCDHS
- Some programs accept other funding sources, such as private insurance, self-pay, or other counties – in such cases a “non-resident” may be able to enroll
- Some services are covered by Medicaid and are not a “county-funded” service – for these residency does not matter

If someone is experiencing homelessness, does that mean they are automatically not a resident / cannot receive services?

- No – once a person establishes residency in a county, they are a resident until they establish residency in a different county



COMPREHENSIVE COMMUNITY SERVICES (CCS)

Voluntary, community-based case-management and psychosocial rehabilitation program funded by the State of Wisconsin and operated by the Dane County Department of Human Services.

CCS services include the following:

- Diagnostic Evaluations
- Medication Monitoring
- Physical Health Monitoring
- Peer Support
- Individual Skill Development and Enhancement
- Employment-Related Skill Training
- Individual and/or Family Psychoeducation
- Wellness Management and Recovery/Recovery Support Services
- Psychotherapy
- Substance Abuse Treatment



CCS ELIGIBILITY

CCS Eligibility

- Eligible for Medical Assistance
- Have mental health or substance use diagnosis
- Functional limitation in one or more major life activities caused by mental health or substance use issues as measured by the state screen
- Need for psychosocial rehabilitation services
- Must have a current physician prescription for services

Additional Information can be found here:

<https://www.danecountyhumanservices.org/Behavioral-Health/Comprehensive-Community-Services>

HOW TO APPLY FOR CCS

- To apply for CCS services, the person who will receive services should contact:
CCS Intake Worker
1202 Northport Drive, 3rd floor
Madison, WI 53704
(608) 242-6415
- The person may call with someone else for support, if they wish
- If a person is a youth or otherwise has a legal guardian, that person must make the referral
- Prescription for CCS must be completed by an MD, DO, or APNP, and can be found here:
<https://www.danecountyhumanservices.org/documents/pdf/CCS/physician-prescription.pdf>

CCS ENROLLMENT PROCESS

1. The individual/guardian calls the CCS Intake Line at (608) 242-6415 and completes a referral.
2. The needed documentation is gathered unless it's already on file.
3. The individual chooses which service facilitation agencies they'd like to work with. A provider directory and other useful resources can be found here: [CCS Resources | Department of Human Services \(dcdhs.com\)](#)
4. Once their name reaches the top of the list, CCS Intake Staff will contact them to schedule their intake.

THINGS TO KNOW ABOUT CCS

- This is a voluntary program which requires that the participant be engaged and want to focus on their recovery
- We don't offer housing, but if someone has mental health/substance use-related goals and wants to pursue CCS, their CCS Service Facilitator could assist them in applying for housing
- We do not offer any Autism-specific services
- If someone is in residential treatment, psychiatrically hospitalized, or incarcerated, we cannot complete their CCS intake until they're discharged
- If someone is enrolled in a long-term care program and/or has a cognitive impairment (e.g. traumatic brain injury or dementia), we must gather additional information & paperwork to ensure that the CCS program is a good fit

CONTINUING COLLABORATION

- Use warm hand-offs
- Obtain an ROI for Dane County Human Services and for any providers the client is working with
- Maintain realistic expectations

Proposed Homeless Services - Behavioral Health Collaboration follow-up meeting

- Consider establishing a biweekly meeting for technical assistance and/or case consultation
- Discuss what would be useful and what is possible
- Initial meeting would *not* be for discussion of specific client cases

If interested, please email Liz (duffie.elizabeth@countyofdane.com)

QUESTIONS?

