

**CRIMINAL JUSTICE COORDINATING COUNCIL /  
JUSTICE & MENTAL HEALTH AD HOC COMMITTEE  
April 5, 2011**

**Call to Order.** Chair Deupree called the meeting of the Justice and Mental Health Ad Hoc Committee to order at 3:32 P.M. in Conference Room N-1/N-2 on the floor of the Rock County Courthouse-East. There was not a quorum of the Criminal Justice Coordinating Council.

**Committee Members Present:** Justice and Mental Health: Chair Neil Deupree, Greg Ammon, Kate Flanagan, Linda Scott Hoag, Lance Horozewski, Carrie Kulinski, Julie Lenzendorf. Criminal Justice Coordinating Council (CJCC): Chair Neil Deupree, Charmian Klyve, Chief David Moore, Eric Nelson, Tom Gubbin (for Art Thurmer), and Rich Gruber.

**Committee Members Excused:** CJCC: Marv Wopat, Patrick Cork.

**Committee Members Absent:** Justice & Mental Health: Dr. Bruce Erdmann, Brian Gies, Denny Luster, Deputy Chief John Olsen. CJCC: Supervisor Sandra Kraft, Judge James Daley, Lorenzo Henderson, Max Arriaga, Ed Pearson, Regina Dunkin, David O'Leary, George Smith, Jr., Sheriff Spoden.

**Staff Members Present:** Elizabeth Pohlman McQuillen, Criminal Justice System Planner/Analyst; Jeff Kuglitsch, Corporation Counsel; Ted Anderson, Juvenile Justice; Nick Osborne, Assistant to County Administrator; Phil Boutwell, Human Services Deputy Director.

**Others Present:** Kay Deupree, Janesville League of Women Voters; Officer Chad Sullivan, Janesville Police Department; Karen Lisser and Jessica Schaefer, ECHO; Jim Zahniser, Tri West; Chris Cline and Ken Minkoff, Zia Partners.

**Approval of Agenda.** Ms. Lenzendorf moved approval of the agenda as presented, second by Ms. Scott Hoag. ADOPTED.

**Wrap-Up Discussion with Mental Health Consultants.** Mr. Minkoff said you are a very cool system, you have a tremendous amount of strength and capacity and there are a lot of ways to use the systems you have without a lot of additional resources. It is apparent you have built a level of trust working with each other. Another strength, it is more than average the amount of people you have working inside this area. If you get the right framework it is obvious you are willing and able to improve your system.

Mr. Minkoff said their findings are: There are a lot of people dying in the system; there are issues in crisis at every single juncture; there are not enough places for people to get help; Tellurian is used too much; there is not a safe place for a crisis intervention to occur; there are disconnects at every level, but you have a lot of people willing to make the system flow better; there are some major gaps on how the system is designed, you need to design more flexibility. The good news is you have this community health center BACH, right now they are small but they have room to grow and they are interested in working more with you.

Mr. Minkoff said there are many opportunities to better and quicken diagnosis of mental health and AODA and get them help quicker and where they need to be/go. In Juvenile Justice there are good parts in the system, but they are not working together. Ms. Cline added there is more

than enough talent in this system and better than average framework here. From a tone perspective there is a feeling that it is a punitive system than a supportive one. When at this low level it is quite painful. You are at an important crux in your services. It is human pressure more so than cost. There are many out there who want to be part of the solution and might give it one more chance. They want to be able to participate in the process. They feel they are on the outside. You are going to have to look at the people to get ways to correct and impact the system. Think of this as a big item.

Ms. Cline said, during the meetings they attended, most everyone was receptive to contributing to the process. There were many good ideas from various groups who see things within that they can do, but where is the partnership. Where would they go – to the CJCC or where? Major issues were: You have significant issues with meds for people; they are changed, taken off, etc. As bad as that is for adults, it is worse for kids. There is an inadequate default path in the jail. They are doing the best they can with what they have but need to make some changes. On the positive end – there are good changes in the judicial area, bracelet program, not enlarging the jail, but this is not enough. You have all the resources you need but must mesh them in a way to be more effective.

Mr. Zahniser said they had some good focus group meetings. They have heard that people are having a hard time getting meds and services. Housing is also difficult to get and this bottlenecks things a bit. One person said he was taunted by jail staff and tried to kill himself. We also had some fantastic stories once they finally got some help. It just is taking a long time to get the help they need and there is no continuity of care. He said they were excited about this group. They are very happy with case managers and therapists and this is amazing. There are systematic issues not people issues. We heard that they feel having peer or community support groups would be very helpful. You seem to need a bit more help with diversity issues such as people with Spanish speaking abilities.

Mr. Zahniser said at the focus group meeting at the library they heard many stories from people about the good things that happened to them. All these stories they shared they said someone found them, took a chance on them, they screwed up but the person did not give up on them and they finally succeeded. This is good and less expensive then kicking them out and having them start care all over again.

Mr. Minkoff asked where is the groups implementation body. He said he met with Mr. Knutson and was told the County will get behind a plan.

Mr. Zahniser said they will be creating a report you will use for implementation. There is usually a step-by-step approach that will lead you into a strategic plan and strategic process. Because the focus is on implementation, we want you to feel there is more of a road map to it. We need to know who will be involved, whom we will get the data from. You don't really have the data you need to do the things you want. How do you begin to count things you need. How many people are there in the jail with mental health or substance health issues; how do we count them, did they get their meds, etc. Simple is better. In Dallas they had an IM system that connected them all, whether in the field or wherever, to keep them all in the know of what is happening. Who will be the data contact – maybe 4 or 5 people – think about it and let them know. A person who can bridge the data, how it is used and how you wish it were used. Maybe on the policy thinking side too.

Ms. Cline asked how the committee(s) wanted to deal with the report. Ms. Flanagan and Mr. Horozewski said they thought it would make sense for this to be Mental Health Ad Hoc members.

Ms. Cline said one of the things people mentioned is if they can see the report, it is good to share it. Mr. Minkoff added that these reports have two audiences: an external audience and an internal audience. This will be helpful to you when you are implementing it.

Mr. Ammon said if the next phone call is in a month, you need to have XYZ in place, something in black and white. Ms. Cline said for each service domain, I want each of you to think about a platform on what you would like to see in the report, what would be good to what would be hurtful. Mr. Minkoff said what we need immediately is a data group. Ms. Cline said when you get the list from us it may help to put this group together.

**Future Meeting Dates and Locations:** Chair Deupree said the next meeting of the Mental Health group is April 19<sup>th</sup>, at 1:00 P.M.

Mr. Minkoff said to get back to them on what you discuss or brainstorm on. Let's get every piece of positive action in this report. Ms. Cline added we will not build you a report you cannot do.

Chair Deupree requested everyone to give nominations for data people to Ms. Pohlman McQuillen.

Mr. Minkoff said, we will not ask you to go through a bunch of reports to collect data. We will get back to you in about a month to talk. May 6<sup>th</sup> was looked at as a possibility.

**Citizen Participation and Announcements.** None.

**Adjournment.** The meeting adjourned at 5:02 P.M.

Respectfully submitted,

Marilyn Bondehagen  
Confidential Administrative Assistant

**NOT OFFICIAL UNTIL APPROVED BY COMMITTEE.**