



Needs Assessment Mental Health Advisory Group to the
Executive Committee of the McLean County Board
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Report of the Needs Assessment Mental Health Advisory Group to the Executive Committee of the McLean County Board

February 18, 2014 – June 10, 2014

Mr. John McIntyre, Committee Chair

Ms. Susan Schafer, Committee Vice-Chair

EXECUTIVE SUMMARY: NEEDS ASSESSMENT

The community needs assessment advisory group was charged with identifying needs and gaps in the behavioral health services in McLean County. The group focused on several broad topics that were identified early in the process. It is by no means all-inclusive. Once those topics were identified, specific groups were invited to present supporting data (where available) to help refine and detail needs and current gaps. Lack of concrete data to create more definitive needs statements were also identified. Providers and other agencies are beginning to collect more data to quantify needs and gaps for future planning.

This report contains community wide statements of need regarding the behavioral health issues facing McLean County today. The statements are based on presentations, interviews, research, and discussions from community leaders, behavioral health professionals, local criminal justice professionals, first responders, local service providers, and government officials. Throughout the process, it became painfully clear, McLean County needs to develop an integrated comprehensive community behavioral health system, with the leadership taking action to effect broad changes in the current system.

It should be noted for each of the major topic areas, there is an overreaching common word, integration. Local providers and agencies, in general, are doing the best they can under the current system, but care is often fragmented. However, with reduced state funding, the advent of the Affordable Care Act, managed care companies moving to a shared risk model, and the overhaul of the entire healthcare system away from fee for service, and in order to maximize local taxpayer dollars and any private dollars, integration and collaboration is imperative.

The group would like to thank the many people and organizations who contributed to the development of this document, either through serving on the advisory group, as a presenter, or by providing information to various group members. Their time and insight was appreciated.

MEMBERS OF THE NEEDS ASSESSMENT ADVISORY GROUP

John McIntyre (Chairman) – McLean County Board
Susan Schafer (Vice Chairman) – McLean County Board
Mike Emery – McLean County Sheriff
Rebecca Foley – Judge, Circuit Court
Cheryl Gaines – Town of Normal
Chris Koos – Mayor, Town of Normal
Ron Morehead – Community Member
Ken Natzke – OSF HealthCare
Becky Powell – Community Cancer Center
Ben Owens – McLean County Board
Carlo Robustelli – McLean County Board
Paul Segobiano – McLean County Board
Alan Sender – Chestnut Health Systems
Julie Sullivan – League of Women Voters
Karen Zangerle – PATH
Matt Sorensen – McLean County Board Chairman

AGENCY PRESENTATIONS

City of Bloomington Fire Department

- Chief Mike Kimmerling

Town of Normal Fire Department

- Chief Mick Humer

City of Bloomington Police Department

- Chief Brendan Heffner

Town of Normal Police Department

- Chief Rick Bleichner

EMS

- Mr. Greg Scott

OSF

- Mr. Ken Natzke

McLean County Jail

- Sheriff Mike Emery
- Ms. Melinda Fellner
- Ms. Jackie Mathais
- Mr. Greg Allen
- Mr. Jamie Kessinger
- Ms. Diane Hughes

Center for Human Services

- Ms. Kim Freyman
- Mr. John Hinrichs
- Ms. Stephanie Roff
- Mr. Kevin Mulloy
- Mr. Tom Barr
- Ms. Cheryl Goldberg
- Ms. Kathy Sallee
- Ms. Melinda Roth
- Ms. Erin Astroth

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Center for Youth & Family Solutions

- Ms. Stephanie Barisch

League of Women Voters

- Ms. Julie Sullivan
- Ms. Sally Rudolph

PATH

- Ms. Karen Zangerle

McLean County Health Department

- Ms. Laura Beavers

Project Oz

- Mr. Peter Rankitus

Home Sweet Home Mission

- Ms. Mary Ann Poulin
- Mr. Matt Burgess

Community Healthcare Clinic

- Ms. Angie McLaughlin

Advocate BroMenn

- Ms. Renee Donaldson

Chestnut Health Systems

- Ms. Joan Hartman

MarcFirst

- Ms. Laura Furlong

BabyFold

- Ms. Karen Major

Salvation Army (Safe Harbor)

- Mr. Tom Fulop
- Ms. Melissa Newbill

Statement of Needs

For the purposes of this document, McLean County implies the scope, and does not necessarily mean McLean County Government or McLean County Board or any particular organization or agency.

McLean County Behavioral Health System

1. McLean County needs a service delivery system that permits ease of access and coordination among points of entry for citizens seeking services from the behavioral health delivery system, supported by an increased amount of public education regarding access points.
2. McLean County needs an integrated, coordinated, and data-informed behavioral health system which realigns resources as priorities and needs change.
3. McLean County needs a designated individual or individuals to administer, monitor report and coordinate mental health services.
4. McLean County needs to develop or access effective assessment tools which include measurable outcomes for all publicly funded mental health programs.
5. McLean County needs behavioral health service providers and agencies to have greater accountability for and transparency in the expenditure of funds along with the need for long term, stable funding.
6. McLean County needs to establish a single advisory group consisting of decision makers from behavioral health providers and funding agencies across the community committed to working in a coordinated and intentional manner to evaluate the state of mental health services, to formulate an overarching statement of purpose, and to develop an action plan addressing community mental health needs. These actions should be agreed upon and adopted across all behavior health agencies and providers.
7. McLean County needs to establish easily accessible sources of information regarding available behavioral health services and enhance public education to permit consumers to more efficiently navigate the behavioral health service delivery system.
8. McLean County needs to provide positive incentives to encourage collaboration among service providers to integrate behavioral health services.
9. McLean County needs the local medical community to increase efforts to develop a multi-disciplinary approach to behavioral health care.
10. McLean County needs to ensure that an array of behavioral health services are available and readily accessible to that population of individuals who confront mental health issues that are not yet chronic and persistent, so that their mental health issues can be timely addressed to reduce the prospect of decompensation resulting in long-term care and hospitalization.
11. McLean County needs to advocate for more adequate funding for behavioral health services at the state and federal level and include mental health in the legislative agenda.

CRISIS SERVICES

Definition - Crisis Care is defined as the interruption of an event and prevention of future events via follow through stabilization. An event includes any or all of the following: loss of function, danger to self or others, or the urgent need for care. Stabilization occurs after the crisis (event).

1. McLean County needs enhanced crisis intervention services with crisis response team members who are knowledgeable about available community services, able to make appropriate cross-agency referrals, and able to assist clients in navigating the behavioral health service delivery system.
2. McLean County needs a mobile crisis response team which is the front door of an integrated community-wide system that thoughtfully directs clients to needed services, monitors compliance, and assesses changing needs.
3. McLean County needs crisis response team members who have the necessary skills, training, education, experience, and confidence to provide an initial therapeutic response to a crisis situation.
4. McLean County needs a minimum of (3) crisis counselors available at any one time to travel, provide walk in service, or over-the-telephone intervention seven days a week, twenty-four hours a day.
5. McLean County should have a crisis response system that gathers data and establishes target goals such as time elapsed from first contact with the consumer to intervention from crisis team professionals, response time for in-person contacts, wait time for phone services, and consumer satisfaction with the service provider.
6. McLean County needs crisis services structured in a manner which reduces the frequency of use of hospital emergency departments by that element of the population that suffers from serious mental illness.
7. McLean County needs crisis services structured in a manner that reduces the amount of time spent by physicians and other medical professionals in the hospital emergency departments through the presence of, and collaboration with, behavioral health professionals servicing the emergency departments.
8. McLean County needs specialized crisis services for the county jail population and targeted strategies designed for the homeless and indigent via services provided by behavioral health professionals.
9. McLean County needs to provide more ongoing training with evidence-based, differentiated curricula intended for laymen and oriented toward public employees (e.g., police, fire, public works, etc.) to better prepare response to clients (both youth and adults) with behavioral health issues.

10. McLean County needs crisis stabilization program(s), including sufficient beds, for children and adolescents in numbers that can be validated by a community needs assessment.
11. McLean County needs a (10-14) bed crisis stabilization program for adults.
12. McLean County needs to insure that follow-up services are available to quickly link clients to services, to provide timely and effective continuity of care to reduce the chance of crisis recurrence, as measured by client tracking.

MEDICATION

1. McLean County needs access to funding that would assist in providing psychotropic medications for those individuals who are unable to afford paying for such medications and to increase the availability of medication management services.
2. McLean County needs community leaders to create an environment that is conducive to attracting and retaining more psychiatrists and advanced practice nurse prescribers to both public and private practice for children and adults.
3. McLean County needs to recruit a minimum of (3) three full-time equivalents of behavioral health professionals, including psychiatrists and advanced practice nurse prescribers for children and adolescents. Their service must include public practice.
4. McLean County needs to recruit three-to-four full-time equivalents of behavioral health professionals, including psychiatrists and advanced practice nurse prescribers for adults in both public and private practice.
5. McLean County, recognizing that 65-70% of psychotropic medication prescriptions written nationally are ordered by primary care physicians and pediatricians, needs to provide consultation and support to help and encourage them to enhance their knowledge of behavioral health issues.
6. McLean County needs an information sharing system that allows different prescribers to share data about individuals receiving services as allowed by law.

JAIL

1. McLean County Jail needs specialized housing to provide a therapeutic environment for those incarcerated who cannot adapt to a general population setting.
2. McLean County needs to provide appropriate training for Correctional Staff specifically regarding situations that occur with the mentally ill in a correctional setting.
3. McLean County Jail needs current technology for correctional needs assessment and classification and case management for those who have been diagnosed with mental illness.
4. McLean County Jail needs to be able to provide for an increasing number of incarcerated individuals access to psychiatrists and counseling, currently 28% diagnosed as mentally ill with 10% receiving psychotropic medication.

5. McLean County needs step-down housing to those individuals diagnosed with mental illness released from corrections facilities.
6. McLean County needs to utilize evidence-based practices in the corrections arena to reduce recidivism.
7. McLean County needs to provide access to case management, medications, counseling within 24 hours of release from jail.
8. McLean County needs to collaborate with all agencies involved with a former inmate with a mental illness to provide a continuum of care following release to reduce recidivism.
9. McLean County Jail needs to work cooperatively with other agencies to pursue the purchasing power of expensive psychotropic medications, currently averaging \$11,000 per month.
10. McLean County needs to examine whether corrections and community-based services can be coordinated for efficiency and consistency.

HOUSING

1. McLean County needs to increase the number of supportive housing beds from 84 beds to an estimated 180 based on the currently available data on the homeless population in the community, which housing needs to include step-down, transitional, and permanent types.
2. McLean County needs to engage the Bloomington Housing Authority, the City of Bloomington, the Town of Normal, and local property owners to insure that there is adequate clean, safe, sanitary, affordable housing alternatives that meet minimum housing code standards. McLean County needs to advocate for clients who are in housing that is unsafe, is of poor quality, or does not meet code.
3. McLean County needs to pursue federal, state, and local funding sources for permanent supportive housing.
4. McLean County needs to ensure that housing is accessible to those with disabilities, chronically mentally ill, veterans, and homeless populations needing continuous care.
5. McLean County needs to integrate and collaborate with housing providers and incentivize the collaboration based upon data driven outcomes.

COORDINATION OF SERVICES

1. McLean County needs integrated, inclusive collaboration for case managers from local agencies working with behavioral health clients, including homeless, developmental disabilities, adolescents, substance abuse, family, school, etc. in a proactive manner.
2. McLean County needs to integrate and encourage shared release of information for the mentally ill in order to provide holistic care, where able for core information.
3. McLean County needs to advocate for changes to the Illinois Mental Health and Developmental Disabilities Code and the Illinois Mental Health and Developmental Disability Confidentiality Act in

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order to share core information between agencies who are providing services to the behavioral health clients.

4. McLean County needs a public model of the DataLink system for all agencies.
5. McLean County needs a case management system to work within existing structures or to engage new structures to minimize the duplication of services and to meet behavioral health needs with support at the leadership level.
6. McLean County needs to seek funding sources and alternatives for social services agencies to convert records to an electronic system.
7. McLean County needs to seek a central point of intake and provide wrap around services, which include basic needs with natural and creative supports along with follow up services.
8. McLean County needs to entice, retain, and cross train case managers to aid in expanding efficiency.
9. Mclean County needs a community wide support system for case managers and families that would include (but not limited to) the faith based community, volunteers, peer support, businesses and private organizations that would provide resources to the diverse segment of the behavioral health population.
10. McLean County needs to evaluate the current/active case management system and effectiveness of previous case management services.