INTEGRATED SUPPORT & RECOVERY SERVICES ADVISORY COUNCIL
June 8, 2015
HHS Building, 2nd Floor, RM 2000
4:00 PM

MEMBERS PRESENT: Monica Kruse, Co-Chair, Cindy Delphey, Mary Dahlby, Regina Siegel, Pam Radtke, Paul Brown, Celia Fluekiger, Va Thao, and Julie Nuttleman.

MEMBERS ABSENT: Diane Hietpas, Brenda White, Gary Kleinertz, Keyla Rosa, Karen Sanness, and Wade Welper

OTHERS PRESENT: Matt Strittmater, Angela Bakken, Donna Christianson, and Joanette Robertson

CALL TO ORDER
Monica Kruse called the meeting to order at 4:05 p.m. once a quorum was reached.

APPROVE MINUTES
Motion by Mary Dahlby/Va Thao to approve the minutes of 03/09/15. Motion carried unanimously

PUBLIC COMMENT
None.

OFFICIAL BUSINESS –

Matt reviewed the changes that have been made in the group. It has blended several groups into one and more changes may be made in the future. The group is there to formerly provide guidance to four different programs. They are as follows:

1. Community Options Program.
2. Coordinated Services Team.

These programs help to address the needs of children/youth and some degree families. Community Options and Family Support Programs are very similar and the same dollars come from the state. We can use the dollars flexibly in order to help address the needs of families with different types of challenging situations. Community Options is a slightly different program for children, adults and families. In the governor’s budget, these two programs are scheduled to go away and come back as one group with the same amount of dollars and four programs will eventually become three. There may be a change of a chair or two, membership council and requirements. New program name is Children’s Community Options Program.

Donna explained the process of children who are presented in crisis. Staff is growing which includes immediate responders that are on call 24 hrs a day and the daytime staff that work with follow up and collaborate with case managers, CST’s, and other programs at the county. Monica inquired about how the process works and how the agencies work together. Donna reported that the child comes to the county in a couple different ways. They may have a crisis in the community or they may come to the hospital. If this happens in the afterhours, follow up is done during the day to find out what is needed for them and this may be pre CST. The staff determines if the child needs long term programming and the functional screen and start putting together plans for the child and family and eventually get into the CST Program. They may already be in the CST program and when a crisis occurs, the plan, which is accessible by the responder, is to tell us about the child and what are the helpful things that we can try to do that are predetermined with that child and family.
There is follow up with the team or case manager and review on how things went and if there is a need to change the plan. The crisis worker will explain what’s helpful with the child and what we can try to do. Workers may contact the service coordinator to review to join in on the case discussion. Have done this quite a few times on the adult side and now would like to do more on the children side since there are more resources available.

Monica motioned to accept the plan Cindy Delphey/Mary Dahlby to 2nd the motion.

Celia reviewed the highlighted changes of the Family Support Plan which needs to be reviewed and approved by the group before submitting. The Family Support Plan had been sent via email to each member along with the agenda. Monica motioned to accept the report Mary Dahlby/Regina Siegel to 2nd the motion.

Paul reported that the idea of the Coordinated Services Team is to give the best form of care by bringing together all the individuals and systems of care, court, school, and health system. The goal is to meet the child’s needs and who they want on their team. Some ideas may be a teacher, friend, or neighbor. Next step was getting people identified and that has been done. There are 11 total thus far and 4 more waiting to be enrolled into CCS. It involves working with juveniles and children that are involved in two or more programs. Half the kids in CCS are in Juvenile Justice and Child Protection Services. Those that fit the profile or criteria are being done so inside a larger program, CCS.

Paul discussed the consideration to increase the frequency and length of Council meetings. Ideas of meeting more frequently or having longer meetings were suggested. To keep the program developing and moving forward quarterly is not often enough to accomplish this. Some suggestions are as follow:

- Meeting once a month keeps members more in touch with what is going on.
- Every other month for 2 hours.
- Once every 2 months for an hour.

Resume with the current schedule and revisit and make a decision at the next meeting. Matt suggested using the time effectively by presenting the prep material far enough in advance. Cindy suggested a time limit on each topic. Presenters send to Lynn the material and how much time it will take for each item.

**SUGGESTIONS FOR NEXT AGENDA**
Matt suggested Birth-3 ideas
Overview of CST Model – Committee and Council roles.

**ADJOURN**
There being no further business, motion by Monica Kruse to adjourn at 5:15PM

The next meeting will be held on Monday, September 14, 2015 at La Crosse County Human Services Building, 2nd floor RM 2000.

The above minutes may be approved, amended, or corrected at the next committee meeting.

Lynn Marcou, Recorder