Rural Health Development Council Meeting Notes



Thursday, March 6, 2014
10:00 a.m. – 2:00 p.m.

UW Health Sciences Learning Center
Madison, WI

Present:

Barb Brewster, USDA Rural Development
Byron Crouse, UW School of Medicine and Public Health
John Eich, WI Office of Rural Health
Kevin Jacobson, WI Office of Rural Health
Jeremy Levin, Rural WI Health Cooperative
Wilda Nilsestuen, UW Department of Family Medicine
Kathy Schmitt, WI Department of Agriculture, Trade and Consumer Protection
Nancy Sugden, WI Area Health Education Centers System
Jackie Szehner, Community Care of Central Wisconsin
Charlie Walker, Chippewa County Economic Development Corporation

John Eich convened the meeting at 10:10.

Representative Sandy Pasch from District 10 (Shorewood/Milwaukee) spoke to the Council about her efforts over the years on mental health issues, culminating in a number of bills passed in 2013-14. Rep. Pasch detailed the status and scope of the recent and in-progress legislation. See attachment for full list. Prior to the bills being written, Rep Pasch and Assembly Speaker Robin Vos held listening sessions around the state on issues related to mental health, and Rep Pasch spoke about some of the recurring themes and items that were not able to be incorporated into the current legislation, but for which she continues to work.

The Council discussed the importance of addressing the stigma of mental illness, as an inhibitor to seeking help, a lack of empathy and cultural competency on behalf of authorities dealing with the mentally ill, and a frequent reaction to behaviors as being solely criminal behaviors. This involves addressing mental health issues with mental health professionals vs the police, funding crisis intervention teams and cultural competency efforts.

Representative Pasch described several bills that allowed other, non-mental health professionals (police, peer specialists, etc) to receive training in assessing, understanding and assisting those with mental illness needs. She stressed the importance of Mental Health Parity and the legislation that addressed it. Council members brought up the difficulty in creating legislation that works in both rural and urban settings, and some of the unique challenges for patients and providers in rural areas.

The Council related several examples from their own experiences with family members with both mental illness and substance abuse. They expressed concerns over the seemingly permanent nature of online information on a person's life, which holds back those who are recovering and moving forward with their lives.

The surge in elderly demographics from the Baby Boom was discussed, as it naturally increases the number of patients in the system with dementia and Alzheimer's, while reducing the professional workforce (through retirements) treating them.

Representative John Nygren from District 89 (Marinette to Green Bay) spoke on legislation he sponsored to address heroin and other narcotic substance abuse. He described several bills (see attached), which would tighten pharmacy scrutiny of those purchasing prescription drugs, grant limited immunity to people bringing an overdose victim to authorities (possession and paraphernalia allowed, but no immunity for selling or intent to sell), improved treatment options for opiate abusers, and an expanded ability for First Responders to carry and use opiate treatment drugs. Once substance abusers were in the system, the legislation approved a series of short-term sanctions that would be enacted automatically from things like a failed drug test, etc, to create clear and immediate consequences for choices leading back to abuse and criminal behavior.

The Council suggested that it would be helpful to match 'quick consequence' laws with increased reward for positive outcomes – it is challenging for those in recovery to find employers who don't hold their record against them, and given the nature of addiction, crimes committed while addicted don't necessarily indicate future behavior. While holding substance abusers accountable for their negative actions, providing a path toward health and positive choices is a good match.

Gary Bezucha, CEO of North Central Health Care in Wausau described the work they do treating mental illness and substance abuse, and patients with developmental disabilities and long-term care in three counties: Marathon, Lincoln and Langlade.

See associated powerpoint slides for details.

Gary discussed the challenges to providing quality care in rural settings, namely lack of providers (psychiatrists, psychologists and licensed substance abuse counsellors), patients spread over a wide geography with transportation needs, and lack of available beds statewide. This is in addition to universal rural population issues of lower rates of health insurance, higher rates of poverty and substance use/abuse, etc. North Central Health Care is reaching for new tools, like tele-psychiatry, and innovative collaborative models (multi-county partnerships, rural track psychiatry residency, community treatments, etc).

Gail Towers-McAskill from the Wisconsin Economic Development Corporation described some of their programs that related to these issues, including the Wisconsin Fast Forward program, which helps training for workers in needed areas. Barb Brewster from USDA Rural Development described their programs which fund building loans for facilities and transportation that address mental healthcare, and telehealth initiatives (like tele-psychiatry).

Adjourned at 1:50 pm