

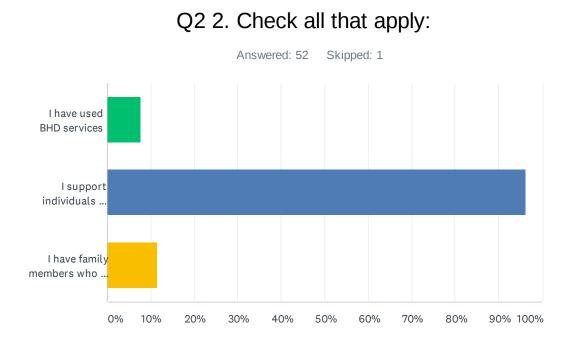
| Q1 1. What is your | role? | Check all that apply. |
|--------------------|-------|-----------------------|
|--------------------|-------|-----------------------|

| ANSWEF | CHOICES | RESPONSES | |
|-----------|--|-------------------|----|
| service p | ovider | 66.04% | 35 |
| policy ma | ker | 5.66% | 3 |
| peer | | 20.75% | 11 |
| family me | mber | 16.98% | 9 |
| advocate | or attorney | 24.53% | 13 |
| person w | no receives mental health or substance use disorder services | 22.64% | 12 |
| Other | | 13.21% | 7 |
| Total Res | pondents: 53 | | |
| | | | |
| # | OTHER | DATE | |
| 1 | Consultant | 6/3/2021 10:25 AI | N |
| 2 | tax paying citizen | 5/26/2021 9:01 AI | N |
| 3 | Shelter Advocate | 5/21/2021 3:22 PI | N |
| 4 | Social Worker | 5/17/2021 3:34 PI | N |
| 5 | Member, Board of Directors, Grand Avenue Club | 5/14/2021 1:02 PI | N |
| 6 | Program Coordinator | 5/14/2021 8:50 AI | N |

5/13/2021 6:54 PM

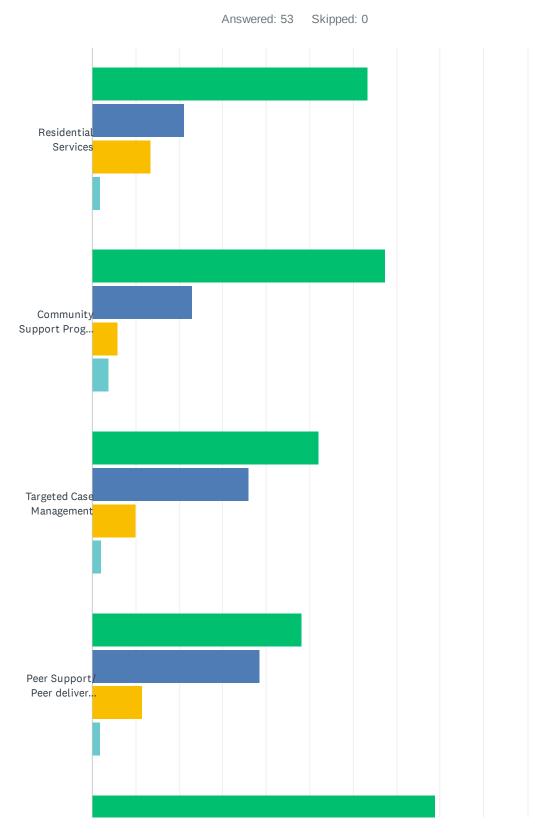
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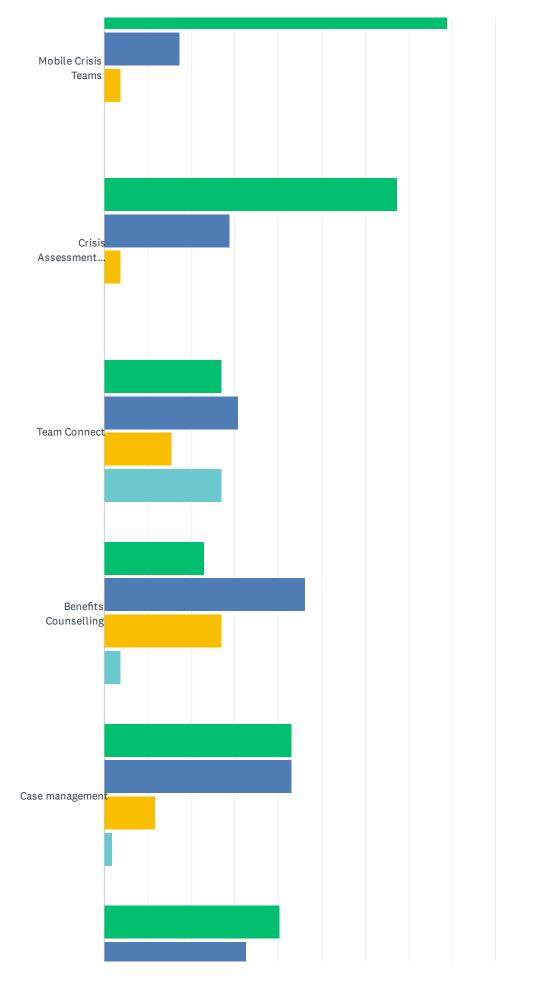
elected official



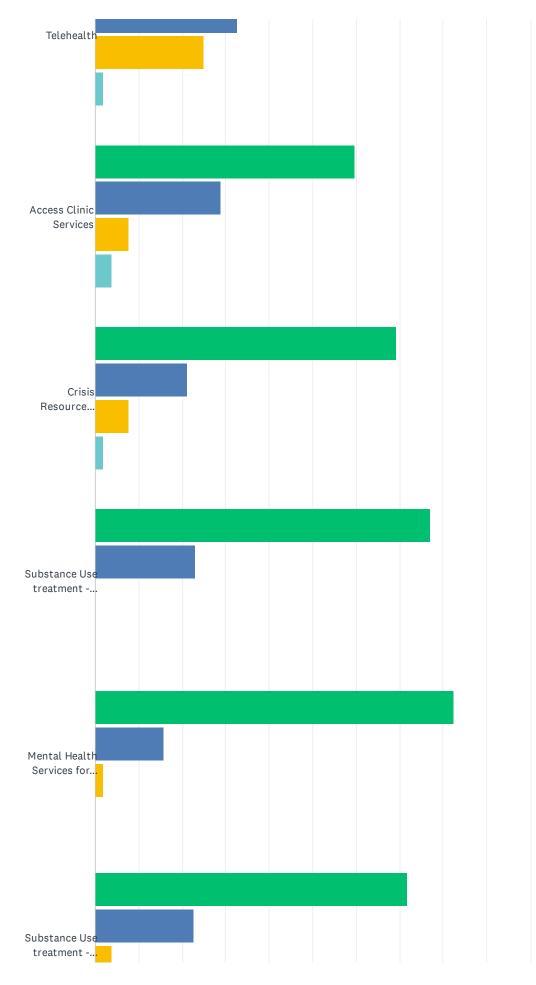
| ANSWER CHOICES | RESPONSES | |
|--|-----------|----|
| I have used BHD services | 7.69% | 4 |
| I support individuals who use BHD services | 96.15% | 50 |
| I have family members who use BHD services | 11.54% | 6 |
| Total Respondents: 52 | | |

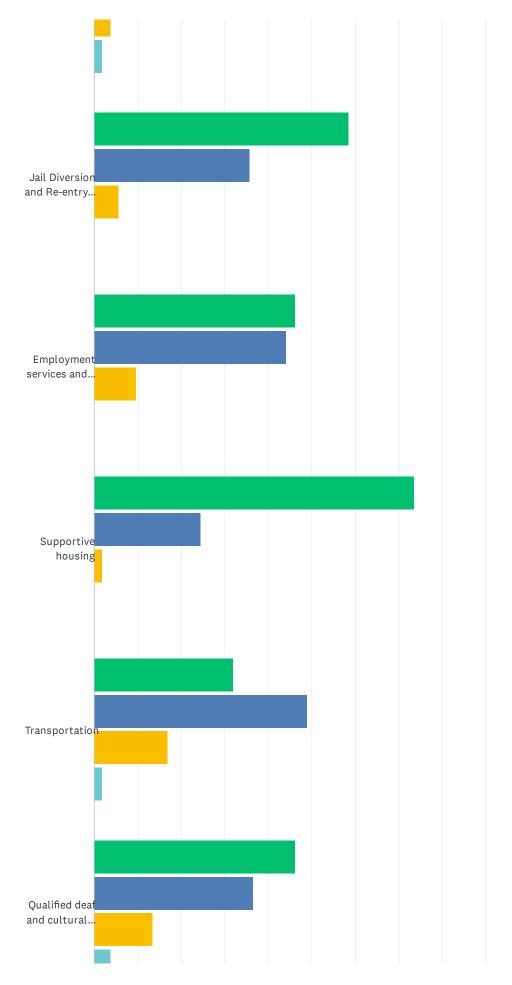
Q3 3. The next BHD/ Milwaukee County will be challenging due to decreases in revenue. It is likely there will be difficult decisions and funding reductions. In an environment where budget cuts will likely be required, what must be prioritized? Please rank the following:

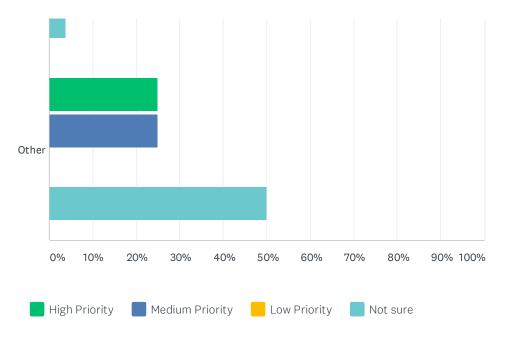












| | HIGH PRIORITY | MEDIUM PRIORITY | LOW PRIORITY | NOT SURE | TOTAL | WEIGHTED AVERAGE |
|---|------------------|-----------------|--------------|--------------|-------|---------------------|
| Residential Services | 63.46% 33 | 21.15% 11 | 13.46% 7 | 1.92% 1 | 52 | 2.51 |
| Community Support Program (CSP) | 67.31% 35 | 23.08% 12 | 5.77% 3 | 3.85% 2 | 52 | 2.64 |
| Targeted Case Management | 52.00% 26 | 36.00% 18 | 10.00% 5 | 2.00% 1 | 50 | 2.43 |
| Peer Support/ Peer delivered services | 48.08% 25 | 38.46% 20 | 11.54% 6 | 1.92% 1 | 52 | 2.37 |
| Mobile Crisis Teams | 78.85% 41 | 17.31% 9 | 3.85% 2 | 0.00% | 52 | 2.75 |
| Crisis Assessment Response (CART) Teams | 67.31% 35 | 28.85% 15 | 3.85% 2 | 0.00% | 52 | 2.63 |
| Team Connect | 26.92% 14 | 30.77% 16 | 15.38% 8 | 26.92% 14 | 52 | 2.16 |
| Benefits Counselling | 23.08% 12 | 46.15% 24 | 26.92% 14 | 3.85% 2 | 52 | 1.96 |
| Case management | 43.14% 22 | 43.14% 22 | 11.76% 6 | 1.96% 1 | 51 | 2.32 |
| Telehealth | 40.38% 21 | 32.69% 17 | 25.00% 13 | 1.92% 1 | 52 | 2.16 |
| Access Clinic Services | 59.62% 31 | 28.85% 15 | 7.69% 4 | 3.85% 2 | 52 | 2.54 |
| Crisis Resource Centers | 69.23% 36 | 21.15% 11 | 7.69% 4 | 1.92% 1 | 52 | 2.63 |
| Substance Use treatment - adults | 76.92% 40 | 23.08% 12 | 0.00% | 0.00% 0 | 52 | 2.77 |
| Mental Health Services for youth | 82.35% 42 | 15.69% 8 | 1.96% 1 | 0.00% 0 | 51 | 2.80 |
| Substance Use treatment - youth | 71.70% 38 | 22.64% 12 | 3.77% 2 | 1.89% 1 | 53 | 2.69 |
| Jail Diversion and Re-entry Services | 58.49% 31 | 35.85% 19 | 5.66% 3 | 0.00% 0 | 53 | 2.53 |
| Employment services and supports | 46.15% 24 | 44.23% 23 | 9.62% 5 | 0.00% 0 | 52 | 2.37 |
| Supportive housing | 73.58% 39 | 24.53% 13 | 1.89% 1 | 0.00% 0 | 53 | 2.72 |
| Transportation | 32.08% 17 | 49.06% 26 | 16.98% 9 | 1.89% 1 | 53 | 2.15 |
| Qualified deaf and culturally competent service providers | 46.15% 24 | 36.54% 19 | 13.46% 7 | 3.85% 2 | 52 | 2.34 |
| Other | 25.00% 2 | 25.00% 2 | 0.00% | 50.00% 4 | 8 | 2.50 |

| # | COMMENTS FOR "RESIDENTIAL SERVICES" | DATE |
|---|---|-------------------|
| 1 | this may be the highest at risk category! | 6/8/2021 5:04 PM |
| 2 | I know of no residential support services for those who have more than a few days crisis. | 6/3/2021 12:54 PM |

| 3 | Having a home is the foundation of recovery | 6/2/2021 6:04 PM |
|---|---|-------------------|
| 4 | There are other MIIwaukee County entities that can do this. | 5/27/2021 8:50 AM |
| 5 | not enough beds for people experiencing a mental health break. | 5/17/2021 3:34 PM |
| # | COMMENTS FOR "COMMUNITY SUPPORT PROGRAM (CSP)" | DATE |
| | There are no responses. | |
| # | COMMENTS FOR "TARGETED CASE MANAGEMENT" | DATE |
| | There are no responses. | |
| # | COMMENTS FOR "PEER SUPPORT/ PEER DELIVERED SERVICES" | DATE |
| 1 | People with lived experience can provide their experience strength and hope. Can provided one-on-one opportunities for community involvement. As well has walking people through needed services. They can be real. | 6/11/2021 1:33 PM |
| 2 | this may be the most effective "vehicle" | 6/8/2021 5:04 PM |
| 3 | Peer support could be incorporated into crisis response | 6/8/2021 12:45 PM |
| 4 | The impact of this is approach is over-emphasized. | 5/27/2021 8:50 AM |
| # | COMMENTS FOR "MOBILE CRISIS TEAMS" | DATE |
| 1 | This service is cumbersome and does not respond in a timely manner and I don't think the small amount of funding that might be allocated will be helpful. | 6/8/2021 4:05 PM |
| 2 | Essential to the community and organizations that deal with the mentally ill. | 5/17/2021 3:34 PM |
| # | COMMENTS FOR "CRISIS ASSESSMENT RESPONSE (CART) TEAMS" | DATE |
| 1 | If expanded this could be a great resource and deterrent for higher acuity services | 6/8/2021 4:05 PM |
| 2 | confusion about difference between mobile crisis and cart | 6/3/2021 12:54 PM |
| 3 | They have not been responsive. | 5/18/2021 2:41 PM |
| # | COMMENTS FOR "TEAM CONNECT" | DATE |
| 1 | This peer work is amazing | 5/18/2021 2:41 PM |
| 2 | I don't know what this is | 5/17/2021 1:50 PM |
| # | COMMENTS FOR "BENEFITS COUNSELLING" | DATE |
| 1 | Most agencies do this themselves without funding. | 5/18/2021 2:41 PM |
| # | COMMENTS FOR "CASE MANAGEMENT" | DATE |
| 1 | If Medicaid recipients would sign up for CCS Milwaukee County residents would have adequate access to case management services through community providers in the CCS network. | 6/8/2021 4:05 PM |
| 2 | It helps but the level of services is low. | 5/18/2021 2:41 PM |
| 3 | Essential to the well being and success outcomes of the clients. | 5/17/2021 3:34 PM |
| # | COMMENTS FOR "TELEHEALTH" | DATE |
| 1 | this is critical for access! | 6/8/2021 5:04 PM |
| 2 | The priority is around universal access to broadband for all community members | 6/8/2021 4:05 PM |
| 3 | This has limited impact, but BHD loves it because it helps them capture revenue. | 5/27/2021 8:50 AM |
| 4 | so difficult to access one on one meetings - Telehealth is the next best thing. | 5/17/2021 3:34 PM |
| # | COMMENTS FOR "ACCESS CLINIC SERVICES" | DATE |
| | There are no responses. | |
| # | COMMENTS FOR "CRISIS RESOURCE CENTERS" | DATE |
| | | |

| 1 | I have not seen any outcomes for these centers | 5/18/2021 2:41 PM |
|----------|---|-------------------|
| 2 | We need more bed's. See many successful outcomes coming from CRC. | 5/17/2021 3:34 PM |
| 3 | In my experience, CRC's have not been helpful with re-entry. They don't consider someone who is being released from jail and wanting to go straight there to be "homeless" unless it has been 24 hours which sometimes is too late by then. | 5/11/2021 3:39 PM |
| ¥ | COMMENTS FOR "SUBSTANCE USE TREATMENT - ADULTS" | DATE |
| L | how many 8th DUI's do we need to support the need for this?! | 6/8/2021 5:04 PM |
| ŧ | COMMENTS FOR "MENTAL HEALTH SERVICES FOR YOUTH" | DATE |
| L | Children's Hospital has a waitlist that is more than 6 months out at this time. | 6/8/2021 4:05 PM |
| ¥ | COMMENTS FOR "SUBSTANCE USE TREATMENT - YOUTH" | DATE |
| L | if we can help them while they're young, they have a better chance for a meaningful life | 6/8/2021 5:04 PM |
| ŧ | COMMENTS FOR "JAIL DIVERSION AND RE-ENTRY SERVICES" | DATE |
| L | yes, this service can prevent re-offending or suicides! | 6/8/2021 5:04 PM |
| 2 | If Milwaukee is going to prioritize racism and equity, then this should be one of the top priorities for the budget | 6/8/2021 4:05 PM |
| 3 | State DOC should do more of this | 5/18/2021 2:41 PM |
| ŧ | COMMENTS FOR "EMPLOYMENT SERVICES AND SUPPORTS" | DATE |
| L | If Milwaukee is going to prioritize racism and equity, then this should be one of the top priorities for the budget | 6/8/2021 4:05 PM |
| <i>‡</i> | COMMENTS FOR "SUPPORTIVE HOUSING" | DATE |
| L | If Milwaukee is going to prioritize racism and equity, then this should be one of the top priorities for the budget | 6/8/2021 4:05 PM |
| 2 | see much success with people living in supportive housing | 5/17/2021 3:34 PM |
| 3 | Yes, 100%. We really need more Safe Haven space in Milwaukee! | 5/17/2021 1:50 PM |
| 1 | Scattered Site | 5/13/2021 1:28 AM |
| ¥ | COMMENTS FOR "TRANSPORTATION" | DATE |
| | There are no responses. | |
| # | COMMENTS FOR "QUALIFIED DEAF AND CULTURALLY COMPETENT SERVICE PROVIDERS" | DATE |
| L | Support this but the numbers of individuals is very low. | 5/18/2021 2:41 PM |
| ŧ | COMMENTS FOR "OTHER" | DATE |
| L | I think that if we can improve mental health, the other issues of housing and transportation will get easier | 6/8/2021 5:04 PM |
| 2 | Peer Respite Centers | 6/8/2021 3:19 PM |
| 3 | Targetting all services provided to the population with developmental disability including training of providers and do not bulk them. | 6/7/2021 1:18 PM |
| | | |
| 1 | MAT and harm reduction services | 6/3/2021 10:25 AM |

Q4 4. Given the budget challenges for Milwaukee County, including BHD, it would be helpful to get your ideas on how to save money, as well as ideas for new revenue: Do you have suggestions to improve efficiency?

Answered: 21 Skipped: 32

| # | RESPONSES | DATE |
|----|---|--------------------|
| 1 | I think the most efficient way to use funds is to 1) invest in protective factors, especially housing and employment services/supports, and 2) invest in harm reduction such as substance use services and accessible mental health support especially those that incorporate peer support. I would also encourage Milwaukee county to reflect on what services are already offered by outside agencies (case management comes to mind, but I'm not super familiar with the landscape). If some things must be cut, I would cut the services that are already in abundance. Personally, I see the county's responsibility to provide as many protective and preventative services/supports as possible. | 6/8/2021 12:45 PM |
| 2 | We need to have a more intensive work on educating the legislation. Create a day to go not as providers but as | 6/7/2021 1:18 PM |
| 3 | streamline services. get rid of the multilayered administration in bhd and county services. Too many cooks in the kitchen. | 6/3/2021 12:54 PM |
| 4 | Reduce CCS programming and focus upon using community service providers to reduce duplication of services. | 6/2/2021 3:46 PM |
| 5 | Using more staff who are qualified to lead agency wide trainings versus hiring out consultants. | 6/2/2021 2:32 PM |
| 6 | Funding services for consumers longer initially will help save money long run by breaking the cycle of recidivism | 6/2/2021 2:28 PM |
| 7 | N/A | 6/2/2021 1:13 PM |
| 8 | No | 6/1/2021 8:01 PM |
| 9 | locate community services staff in the community - co-locating at community agencies may be more cost-effective. | 6/1/2021 6:57 AM |
| 10 | My sense is that BHD is overstaffed with administrators. I am not sure how necessary many of them are. I think BHD should considering reducing its administrative staff, perhaps via retirements at first. | 5/27/2021 8:50 AM |
| 11 | Divert money from policing to community supports | 5/26/2021 12:26 PM |
| 12 | System-wide integration/collaboration/cooperation between and among county divisions; including with community providers within the Family Care system of care; expand No Wrong Door. | 5/26/2021 11:23 AM |
| 13 | decrease police budget | 5/26/2021 9:01 AM |
| 14 | There's an old saying" There's safety in numbers". More employed Mental Health Care workers are a must. And limited amount of clients to each Care Worker. | 5/21/2021 3:22 PM |
| 15 | Extremely overstaffed for the size of inpatient beds. There is a lot of waste for a hospital that is closing. | 5/18/2021 2:41 PM |
| 16 | N/A | 5/17/2021 3:20 PM |
| 17 | Stop funding psychiatrists, hire more therapists and case managers. More bang for your buck. | 5/17/2021 2:09 PM |
| 18 | Better trained County staff. County staff often create inefficiencies and more work for provider agencies. | 5/14/2021 12:20 PM |
| 19 | Pay providers to care for a panel of patients. If hospitalized, provider receives lower pay. Incentive to keep their patients out of crisis. | 5/13/2021 8:35 PM |

| 20 | Scrutinize current providers to make sure that they are doing what they claimed in their original proposal, is the work really being done? is the county getting their bang for their buck? | 5/13/2021 5:14 PM |
|----|--|-------------------|
| 21 | Try to focus on early intervention more and maybe reduce specific qualifications for case management-type services. Sometimes it seems like someone has to be re-entering the community for the 5th time before they are accepted into a TCM or something similar. Seems it doesn't always take into account that some people don't develop severe needs until it is too late to help. | 5/11/2021 3:39 PM |

Q5 Any suggestions for saving dollars?

Answered: 16 Skipped: 37

| 1:18 PM 12:54 PM |
|---------------------|
| 12:54 PM |
| |
| 10:25 AM |
| 3:46 PM |
| 1:13 PM |
| 8:01 PM |
| L 8:50 AM |
| L 11:23 AM |
| L 10:31 AM |
| L 9:01 AM |
| L 3:22 PM |
| L 2:41 PM |
| L 3:20 PM |
| L 2:05 PM |
| L 5:14 PM |
| L 4:26 PM |
| |

Q6 Ideas for raising money or generating additional revenue?

Answered: 20 Skipped: 33

| # | DECDONCES | DATE |
|----|---|--------------------|
| # | RESPONSES | |
| 1 | get children in schools involved as a pre-emptive effort | 6/8/2021 5:04 PM |
| 2 | I would advocate for decreasing the Milwaukee Police Department's overinflated budget to allocate more money into non-police crisis intervention services. | 6/8/2021 12:45 PM |
| 3 | grant funding | 6/3/2021 12:54 PM |
| 4 | no | 6/2/2021 3:46 PM |
| 5 | Talk to Potawatomi casino about starting a collection bin for money and machine ticket credits that are sometimes left in the machines or thrown on the floor. | 6/2/2021 2:32 PM |
| 6 | N/A | 6/2/2021 1:13 PM |
| 7 | continue to pursue grants and other fund development opportunities. Children's Hospital has raised so much money for mental health. the county should be able to obtain some of that support. | 6/1/2021 6:57 AM |
| 8 | Aggressive search for federal funds? Local foundations? Putting a lid on salaries? | 5/27/2021 8:50 AM |
| 9 | Federal grants, charge a modest copay such as Medicaid does; divesting of underperforming property for development. | 5/26/2021 11:23 AM |
| 10 | Pay for service. Open services up to people who can pay. | 5/26/2021 10:31 AM |
| 11 | Have the top 1% pay their fair share in taxes so we can generate FREE HEALTHCARE FOR ALL. | 5/21/2021 3:22 PM |
| 12 | Getting Access Clinic Medicaid certified to create services billable. | 5/20/2021 11:59 AM |
| 13 | Grant funding and Medicaid billing | 5/18/2021 2:41 PM |
| 14 | N/A | 5/17/2021 3:20 PM |
| 15 | Privatizing BHD | 5/17/2021 2:05 PM |
| 16 | Continually emphasize that dollars spent "up front" typically produce significant savings in the cost of, for example, incarceration and hospitalization. | 5/14/2021 1:02 PM |
| 17 | Charge \$1 for each HOP ride | 5/13/2021 4:26 PM |
| 18 | Private Pay | 5/13/2021 3:38 PM |
| 19 | Increased taxes on the wealthy and large businesses | 5/13/2021 2:40 PM |
| 20 | Do more community involvement to educate members on how important improving the mental health crisis is. | 5/11/2021 3:39 PM |

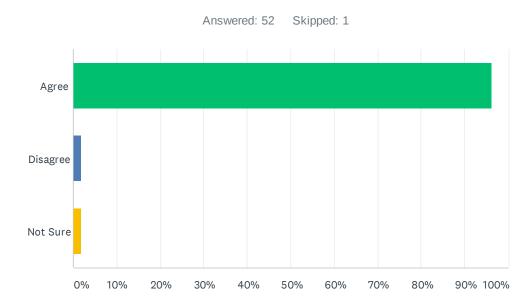
Q7 5. As part of the redesign of crisis services in Milwaukee, the County's psychiatric emergency room (PCS) will be closing and will be replaced by a Mental Health Emergency Center that is a joint venture of the private health care systems and Milwaukee County. This new model was presented at the April MHTF meeting.Share your recommendations for the success of this operation:

Answered: 18 Skipped: 35

| # | RESPONSES | DATE |
|----|--|--------------------|
| 1 | Provide Peer Specialists and Community providers in the center. | 6/8/2021 4:50 PM |
| 2 | I hope that people with lived experience of mental health and substance use issues are included in the planning and implementation of this new Mental Health Emergency Center. It would be particularly important to include those who have experienced psychiatric hospitalization. Staffing peer-specialists at the center will also be crucial. I feel strongly that all policies in these types of crisis care centers should allow for as much autonomy as possible for "consumers" so their wishes and needs are respected and they have more space for genuine healing to occur. When working with people with lived experience, please do not tokenize them, and compensate them for their work and insight. | 6/8/2021 12:45 PM |
| 3 | no wrong door approach | 6/3/2021 12:54 PM |
| 4 | I think it's a great idea | 6/2/2021 6:04 PM |
| 5 | N/A | 6/2/2021 1:13 PM |
| 6 | As much as possible, the staff should reflect the community the center is in. | 6/1/2021 8:01 PM |
| 7 | Many people who come to the new ER will not need hospitalization. There must be on-site resources to connect them with voluntary services - housing, benefits counselling, mental health and substance use disorder services. We also need community engagement in the planning and opening the new ER - to date that has not occurred. Better communication and sharing of information - a more transparent process. | 6/1/2021 6:57 AM |
| 8 | I am optimistic about this new arrangement. It took some time to get used to the idea of privatization especially since the "private" systems resisted being helpful for years. I don't see much expertise in the MHTF about this arrangement. | 5/27/2021 8:50 AM |
| 9 | It begins with culture; and should reflect communication, cooperation and, that the prevailing objectives should demonstrate a "we" approach to serving consumers. | 5/26/2021 11:23 AM |
| 10 | Will bring in more money? | 5/26/2021 10:31 AM |
| 11 | This is the best idea since Peanut Butter and Jelly sandwiches. | 5/21/2021 3:22 PM |
| 12 | I think most important will be to make sure it is clearly communicated how to access services at the emergency center. | 5/19/2021 9:08 AM |
| 13 | This is very expensive operation and the County is taking on the costs with no clear effort on where the revenue is going. | 5/18/2021 2:41 PM |
| 14 | Will your private prison still feel like a prison? | 5/17/2021 2:09 PM |
| 15 | Hold administrators of the new Emergency Center accountable for ability of non-private pay patients to access care when needed. Utilize certified peer specialists in the EC to support non-private patients during stays of >2 hours. Every patient admitted for suicidal ideation and/or attempt makes a safety plan collaboratively with a staff member at least 24 hours prior to discharge. Make sure that discharge plans (including a safety plan) are conveyed to a patient's primary care provider, mental health provider, patient and family members. All patients | 5/13/2021 8:35 PM |

| | admitted for suicidal ideation and attempts are asked if they have a gun at home. The gun is removed from the home and verified gone prior to discharge. Provide all patients discharged with a follow up plan with a provider within 1 week of discharge. Contact all discharged inpatients with a caring contact by their preferred mode (mail, phone, email, text, etc) within 2-3 days of discharge. Inform all patients (and a key person close to them) hospitalized for suicidal ideation/attempt that their risk of being suicidal may actually increase after discharge from the hospital. | |
|----|---|-------------------|
| 16 | Adequate funding Schedule program audits Open houses for the public and media blitz before it opens When persons are newly elected throughout the county, push them to tour the County facilities. | 5/13/2021 6:54 PM |
| 17 | Excellent. It has been a very long time coming. | 5/13/2021 5:14 PM |
| 18 | Don't deny services to those who are coming there, much less with a police escort. Maybe work closer with Officer's patroling the streets? | 5/11/2021 3:39 PM |

Q8 6. Mental Illness and the Justice Systema. Do you believe that people with serious and persistent mental illness often have police contact or end up being arrested and put in the criminal justice system?



| ANSWER CHOICES | RESPONSES | |
|----------------|-----------|----|
| Agree | 96.15% | 50 |
| Disagree | 1.92% | 1 |
| Not Sure | 1.92% | 1 |
| TOTAL | | 52 |

| # | COMMENTS (OPTIONAL): | DATE |
|---|---|-------------------|
| 1 | I've seen this personally with my son. | 6/8/2021 5:04 PM |
| 2 | I also think in Milwaukee that Black males living with mental illness are disproportionately placed into the criminal justice system instead of receiving options for diversion. | 6/8/2021 4:05 PM |
| 3 | This is a true statement. Mental illness is demonized and criminalized, and people generally assume that those exhibiting deviant perceptions, feelings, and behaviors are a danger, and thus turn to the police to make them go away. On top of this, police are far more likely to be aggressive and hostile to Black, Brown, and Indigenous people in general, so the BIPOC population with mental illness face two-fold risk to their safety. We need to seriously account for the threat of police while advocating for people with disabilities and mental illness. | 6/8/2021 12:45 PM |
| 4 | Usually contact with the police comes after someone calls them. Mental health is not the root cause but the social and environmental factors that surround the person. These factors are cheaper and easier to solve than justice system transformation. Mindfulness practices and live-in buddies. | 6/7/2021 1:18 PM |
| 5 | the police are contacted for psychiatric crisis and there are no other places to take people i crisis, or hey are turned away because they do not meet a narrow definition of crisis. | 6/3/2021 12:54 PM |
| 6 | Because the police don't know really what to do with them or how to relate or refer them to other services they end up in jail | 6/2/2021 6:04 PM |
| 7 | Need more capacity for diversion. Develop a Forensic Assertive Community Treatment (FACT) to serve justice involved individuals with significant mental health needs. | 6/1/2021 6:57 AM |

| 8 | As a provider, I have seen that this is sometimes necessary, although I do think that the relatively high proportion of inmates with MI is problematic. My experience with the sheriff's office and the MPD has been positive and policers have been helpful in situations in which they were genuinely needed. I want to work with them. I have also experienced people staying out of trouble when they are motivated by other things. | 5/27/2021 8:50 AM |
|----|---|--------------------|
| 9 | I agree but it isn't as if people don't understand what they're doing. People with very serious mental illnesses are often (not always but more often than given credit for) treated compassionately by law enforcement and are taken to crisis intervention instead of jail. I see jail occurring more for people with substance abuse (and not always as a direct result of drug or alcohol use, but indirectly due to living a life where all/most legitimate priorities fall by the wayside). | 5/26/2021 10:31 AM |
| 10 | Since closing the Mental Health facilities, there's been more crimes, homelessness and lack of care for our most vulnerable. It's really a shame. | 5/21/2021 3:22 PM |
| 11 | Every single person I have worked with who was formerly incarcerated is living with mental illness. | 5/19/2021 9:08 AM |
| 12 | Yes, mostly because they have been unable to access the level of services they need. | 5/17/2021 4:18 PM |
| 13 | Many people with chronic and persistent mental health do not take their medication as prescribed We have no idea what it is like to have voices speaking to all day and how difficult life becomes to navigate in the real world. Unfortunately, with the demands of the Police Department and through no fault of their own, do they ever have enough time to truly listen to those suffering from mental health. | 5/17/2021 3:34 PM |
| 14 | Police and criminal justice system do not know how to rehabilitate those who have serious and persistent mental illness | 5/17/2021 3:20 PM |
| 15 | Yes, and particularly true for black and brown individuals. | 5/13/2021 8:35 PM |
| 16 | The contact I believe is true, however, I am not sure about the percentage of persons that are arrested, or are issued citations (which can end up in jail). Also, different police forces within the county have different police policies, contact numbers, contact outcomes, and arrest rates- - the farther from the jail in the County, the less likely a person will be jailed except for, major violent crime. | 5/13/2021 6:54 PM |
| 17 | it happens way to often which is why the CART and mobile crisis teams must be increased to meet demand, and increased community mh services to care for those lucky enough to be diverted from jail/prson. | 5/13/2021 4:29 PM |
| 18 | Not if we work hard as a community to get them the help they need early | 5/13/2021 4:26 PM |
| 19 | Very much so. | 5/11/2021 3:39 PM |
| | | |

Q9 b. If you agree, what suggestions do you have for reducing the numbers of people having this experience?

Answered: 39 Skipped: 14

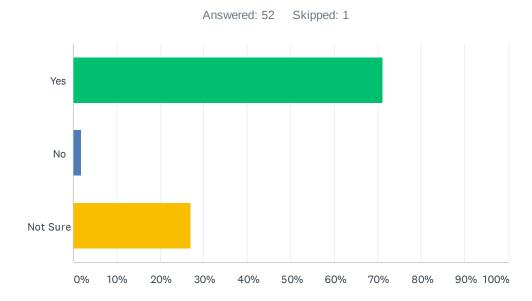
| # | RESPONSES | DATE |
|----|--|--------------------|
| | | |
| 1 | First of all providing community based mental health and substance abuse services to support people before crisis occurs. Provide CIT training to the majority if not all of police officers. Focusing on using mental health crisis teams prior to the escalation of the situation. Diverting people to treatment rather then jail. | 6/11/2021 1:33 PM |
| 2 | get them into counseling in school as soon as they start having issues. Truancy should result in a visit to the jail so they have a chance to see where they're headed if they don't get the help they need. | 6/8/2021 5:04 PM |
| 3 | Send out Social Workers or Community Service providers with police. | 6/8/2021 4:50 PM |
| 4 | 1. Create the specialized CIT task force for police officers so that we have trained officers who have a compassionate approach and perspective as well as a desire to work with this population. 2. Have mental health providers/clinical social workers be available to MPD officers to help determine the clinical need instead of using jail as the default | 6/8/2021 4:05 PM |
| 5 | Having conversations with people instead of judging and doing harm | 6/8/2021 3:19 PM |
| 6 | We need to remove the police from mental health crisis response, or at least add more peer- led crisis intervention services so that the police are utilized far less. There is so much evidence that incarceration and forced hospitalization makes mental health worse, and can have a permanent effect on people's access to things that improve quality of life, such as employment and housing. If we continue relying on police to respond to crisis calls, we will only perpetuate the criminalization and incarceration of BIPOC communities with mental health struggles. It should be of utmost priority to establish new resources instead, and we can look to things like the CAHOOTS or STAR programs that are utilized in other states. | 6/8/2021 12:45 PM |
| 7 | See above | 6/7/2021 1:18 PM |
| 8 | change the criteria for admission into hospitalization. | 6/3/2021 12:54 PM |
| 9 | Look at the role of the mental health board and focus on the statutory charge for the development of diversion programs. | 6/3/2021 10:25 AM |
| 10 | More services like crisis resource centers and a lot more combination of behavioral health with the police department for a Milwaukee community | 6/2/2021 6:04 PM |
| 11 | Collaboration between police services and community mental health agencies. | 6/2/2021 3:46 PM |
| 12 | Encouragement of more CART involvement and collaboration with crisis services. | 6/2/2021 2:32 PM |
| 13 | More education about how to recognize the need for other intervention by mental health task force!? | 6/2/2021 1:13 PM |
| 14 | 4. Develop a Community Justice Center for justice involved persons with mental health needs. This drop off center would include respite beds, resources for housing, behavioral health, and benefits counselling, as well as resources from law enforcement and the justice system. Fund an additional Milwaukee County Disability Benefit Specialist position to assist justice involved individuals who have a mental illness or other disability, with a focus on supporting re-entry for the population at the Jail and House of Corrections. | 6/1/2021 6:57 AM |
| 15 | Providing BHD people in the community with training in deescalating situations. Staying calm. Not assuming that monsters lie within our people and GUN CONTROL. | 5/27/2021 8:50 AM |
| 16 | Increase crisis teams visibility so they be called 1st. | 5/26/2021 12:26 PM |
| 17 | Expand CIT training across all EMS, Law Enforcement and First Responders (including private ambulance, etc., services) | 5/26/2021 11:23 AM |

| 18 | More cart and crisis teams. More training on mental health and addiction for law enforcement. Diversion opportunities at the court level. | 5/26/2021 10:31 AM |
|----|---|--------------------|
| 19 | Increased training for officers on how to work with individuals in mental health crisis. Creation of a team who acts as a check for mental illness before the person is booked and processed in the jail to determine if this individual needs mental health treatment not arrest. | 5/26/2021 9:55 AM |
| 20 | increase housing opportunities, invest in support programs, take mental health serious, stop criminalizing mental health | 5/26/2021 9:01 AM |
| 21 | Go back to having livable mental health facilities. | 5/21/2021 3:22 PM |
| 22 | I think there should be something like drug court but for mental health. Rather than putting mentally ill people in prison, they should be provided services that will help them become productive members of society again. If we punish people for the crime but don't address underlying mental health, there is no reason the crime won't keep happening after a person is released from incarceration. | 5/19/2021 9:08 AM |
| 23 | Better treatment and care so they are not in crisis. | 5/18/2021 2:41 PM |
| 24 | Increased funding for mental health practitioners (therapists, nurse practitioners and psychiatrists in particular) to work with the homeless and uninsured populations. | 5/17/2021 4:18 PM |
| 25 | Education for the Police Officers and other people working directly in the community, stores and banks etc And to take into account that the person off medication differs significantly from the person taking medication as prescribed. EXPLAIN THE TERM EMPATHY TO THE COMMUNITY - USE BILLBOARDS TO EDUCATE THE PEOPLE. Many people don't understand how difficult the day is for people suffering with untreated mental health. | 5/17/2021 3:34 PM |
| 26 | Stop using police as social workers | 5/17/2021 2:09 PM |
| 27 | Increased case management assistance, employment opportunities and additional housing and child care options. | 5/17/2021 2:05 PM |
| 28 | Having social workers or trained BHD staff respond to certain MPD calls. Ongoing and continued training for MPD. Push back on aggressive MPD actions publicly. | 5/17/2021 1:50 PM |
| 29 | There are many innovative programs across the country for crisis response services that either (a) do not involve law enforcement officers or (b) recast their role. See, for example, the "Cahoots" program in Oregon https://whitebirdclinic.org/what-is-cahoots/. Please also see this article about non-police crisis response services, just published in the New England Journal of Medicine: https://www.nejm.org/doi/full/10.1056/NEJMms2035710 | 5/14/2021 1:02 PM |
| 30 | Have trained mental health professionals available to assist and de-escalate. | 5/14/2021 12:20 PM |
| 31 | Increasing community support programing and increasing funding for housing | 5/14/2021 8:49 AM |
| 32 | Have an alternate system. Police would no longer respond to 911 calls for mental health crisis. More community crisis intervention teams staffed by persons who are black and brown. Without firearms. | 5/13/2021 8:35 PM |
| 33 | create an ad hoc committee for reviewing practices (evidence-based) to address disparate prosecution and disposition policies among the municipalities; create a compact with the DA and municipal prosecutors/police chiefs on consistent standards to determine consistent dispositions of like behaviors. | 5/13/2021 6:54 PM |
| 34 | Track the frequent flyers and pull them out of the system. devise programming for this list. | 5/13/2021 5:14 PM |
| 35 | see above | 5/13/2021 4:29 PM |
| 36 | Make it easier to seek help, its DAMN impossible sometimes to get someone hospitalized when it is clearly the best solution for the current issue. | 5/13/2021 4:26 PM |
| 37 | Better training and support for these individuals by educating CSP and Case Managers in identifying these individuals before an incident occurs and having wraparound services and a plan of action developed so that these individuals have a plan of action when the start experiencing a mental health crisis. | 5/13/2021 3:38 PM |
| 38 | Responses other than police to crises, better training for police on crises and de-escalation, more focus on the basics such as housing, food, healthcare, and employment | 5/13/2021 2:40 PM |
| | | |

39 Early Intervention and addressing people's needs early on and not after they have already 5 decompensated.

5/11/2021 3:39 PM

Q10 c. Do you see a role for the Community Justice Council or other community organizations to work with BHD to address this problem?



| ANSWER CHOICES | RESPONSES | |
|----------------|-----------|----|
| Yes | 71.15% | 37 |
| No | 1.92% | 1 |
| Not Sure | 26.92% | 14 |
| TOTAL | | 52 |

| # | COMMENTS (OPTIONAL): | DATE |
|---|---|--------------------|
| 1 | CJC has not been effective in implementing real and effective system change. | 6/8/2021 4:05 PM |
| 2 | The CJC focuses on the aggressors and dismiss the victims who are a larger group and embedded in the community, many with MH challenges themselves. I have not heard any CJC reference to how to heal the community instead on carrying their own personal grievances due to poor decision making process. NOt their personal fault but their circunstances and context. | 6/7/2021 1:18 PM |
| 3 | they have political will and national partners to assist in this work | 6/3/2021 12:54 PM |
| 4 | Yes, ideally, but I have attended perhaps 2 meetings of this group and I don't see its relevance to anything that happens on the ground. Lots of talking. I'd love to see a more activist stance. | 5/27/2021 8:50 AM |
| 5 | Not familiar with this | 5/26/2021 10:31 AM |

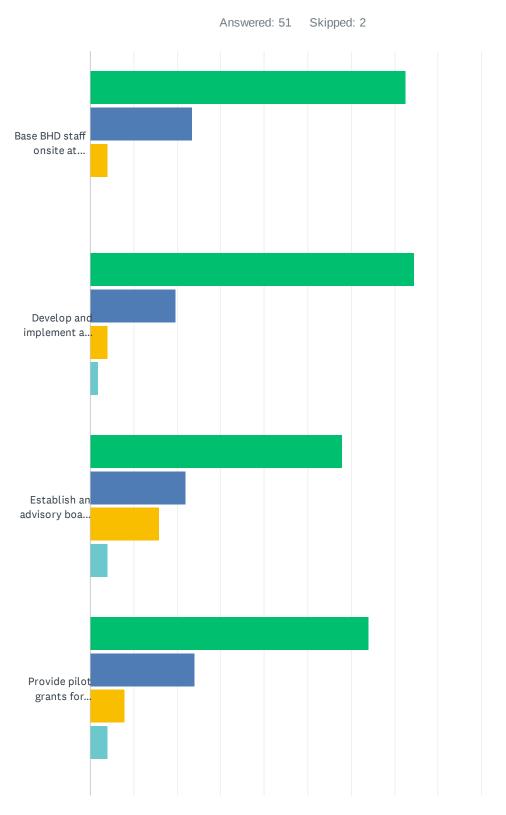
Q11 If you answered "yes" to seeing a role for the Community Justice Council or other community organization, please explain:

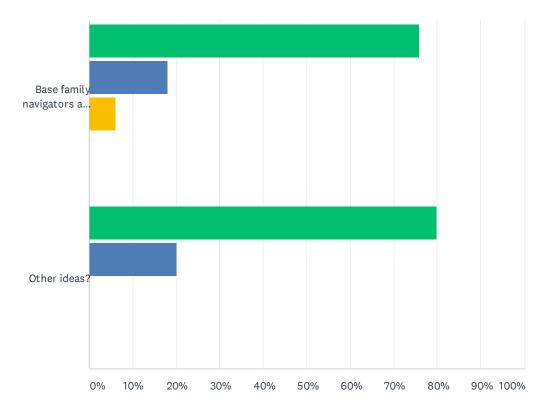
Answered: 19 Skipped: 34

| # | RESPONSES | DATE |
|----|--|-------------------|
| 1 | if they work together, there will be a better outcome! | 6/8/2021 5:04 PM |
| 2 | Speaking for my organization (Mental Health America of WI), I could see us contributing research on peer-led crisis response teams that have worked in other areas, and we could connect BHD with peers that we work with who have lived experience with mental health/substance use challenges and psychiatric hospitalization. I imagine that we all have many connections to contribute! | 6/8/2021 12:45 PM |
| 3 | see above | 6/3/2021 12:54 PM |
| 4 | It's important to have providers and police as part of this Justice system. Community members are just as important. | 6/2/2021 6:04 PM |
| 5 | Continued training provided by BHD crisis services to new MPD recruits, more involvement at MPD team meetings will keep communication lines open. | 6/2/2021 2:32 PM |
| 6 | It will create more trust because of the connections! | 6/2/2021 1:13 PM |
| 7 | CJC has the right people and agencies at the table - their partnership is needed to advance change. | 6/1/2021 6:57 AM |
| 8 | I'd love to see a more activist stance, more public statements, more reaching out to community=based organizations doing direct service. | 5/27/2021 8:50 AM |
| 9 | The criminal justice system is intertwined with the mental health system and the community. If the groups look independently the problems will not be addressed but shifted to other groups. Working together to advocate for mental health treatment, destigmatize mental illness and educate teachers, officers, political figures, and neighbors about mental health could lead to less negative police and community contacts and increased support for BHD or other mental health services. | 5/26/2021 9:55 AM |
| 10 | These entities should work in sync with the betterment of our community up front. | 5/21/2021 3:22 PM |
| 11 | Systems need to work together on these issues and promote joint solutions. | 5/18/2021 2:41 PM |
| 12 | The notion of two heads is better than one. With multiple people and organizations putting a finger on the pulse of the community this opens awareness, education and opportunities. | 5/17/2021 2:05 PM |
| 13 | We need to move away from having police be first responders to people who may be vulnerable and whose situation doesn't necessitate sending in armed officers. | 5/17/2021 1:50 PM |
| 14 | Community is the heart of a city. Milwaukee residents would benefit from this service with collaboration of the two organizations. | 5/14/2021 8:50 AM |
| 15 | Not sure-would they be involved in responded to crisis calls? If police were still involved, could they be called to the scene to support the person in distress? Could they make sure that medications and other needs of a detained individual were provided? | 5/13/2021 8:35 PM |
| 16 | They can devise the programming that is needed. | 5/13/2021 5:14 PM |
| 17 | we need justice activists to help push diversion at booking and increase mh services to treat those who would have been imprisoned but for diversion to crucial treatment services. | 5/13/2021 4:29 PM |
| 18 | I hope that these justice programs can coordinate and have regular meetings with BHD so that they can develop a plan of action which can facilitate community based supports providing better service and more timely service. This will hopefully keep people in the community rather than the criminal justice system. | 5/13/2021 3:38 PM |

19 Create a position similar to the BHD liasion, but different in that maybe they study patterns and 5/11/2021 3:39 PM try and catch individual's who are high-risk in becoming incarcerated and maybe even those who have been incarcerated and are frequent flyers but don't quite "qualify" for CM services.

Q12 7. Milwaukee continues as the most segregated city in the country for African Americans, including disparities in access to mental health and substance user services and treatment. Milwaukee County has made racial equity a key priority. What actions can BHD take to address racial and ethnic equity? Please rank these ideas and add your own:





High Priority Medium Priority

Low Priority

Not sure

| | HIGH PRIORITY | MEDIUM PRIORITY | LOW PRIORITY | NOT SURE | TOTAL | WEIGHTED AVERAGE |
|--|------------------|-----------------|--------------|-------------|-------|---------------------|
| Base BHD staff onsite at trusted community partners in diverse communities in high need neighborhoods. | 72.55% 37 | 23.53% 12 | 3.92% 2 | 0.00% 0 | 51 | 2.69 |
| Develop and implement a plan to increase the diversity of the mental health work force. | 74.51% 38 | 19.61% 10 | 3.92% 2 | 1.96% 1 | 51 | 2.72 |
| Establish an advisory board with representatives from diverse communities | 58.00% 29 | 22.00% 11 | 16.00% 8 | 4.00% 2 | 50 | 2.44 |
| Provide pilot grants for innovative projects to improve access for minority communities | 64.00% 32 | 24.00% 12 | 8.00% 4 | 4.00% 2 | 50 | 2.58 |
| Base family navigators and parent peer specialists at community agencies or schools in high needs areas. | 76.00% 38 | 18.00% 9 | 6.00% 3 | 0.00% 0 | 50 | 2.70 |
| Other ideas? | 80.00% 4 | 20.00% 1 | 0.00% 0 | 0.00% 0 | 5 | 2.80 |

| # | COMMENTS FOR "BASE BHD STAFF ONSITE AT TRUSTED COMMUNITY PARTNERS IN DIVERSE COMMUNITIES IN HIGH NEED NEIGHBORHOODS." | DATE |
|---|--|-------------------|
| 1 | Good to see progress being made with basing BHD staff at FQHCs and location for new ER $% \left({{{\rm{B}}} \right) = 0} \right)$ | 6/1/2021 6:57 AM |
| 2 | have staff accessible to assist in shelters and low income housing programs. | 5/17/2021 3:34 PM |
| 3 | Black and brown neighborhoods do not need more white medical professionals telling them how to live their lives. | 5/17/2021 2:09 PM |
| 4 | However, many employees will be afraid to go. Expect a lot of retirements and movement. | 5/13/2021 5:14 PM |

Also they have to acknowledge their own insecurities, prejudices and biases. They will NOT be effective until they do.

| # | COMMENTS FOR "DEVELOP AND IMPLEMENT A PLAN TO INCREASE THE DIVERSITY OF THE MENTAL HEALTH WORK FORCE." | DATE |
|---|--|--------------------|
| 1 | This sounds nice but it is important to keep in mind that organizations have to be ready for more diverse staff and have equitable practices and policies in place to help retain a diverse workforce. It is more complicated than the community realizes. For instance, there needs to be more diverse leadership at the decision-making level and sadly, even BHD our biggest vendor of services does not meet the criteria of diverse leadership, which makes it very hard for educated and trained diverse applicants to survive in these environments. And, until BHD/DHHS implements equitable contracting practices we will continue to see the same disparities in access. | 6/8/2021 4:05 PM |
| 2 | Adequate compensation (i.e.; \$15 minimum starting wage) is a must to ensure the health and financial security of mental health workforce. | 6/8/2021 12:45 PM |
| 3 | And SUD workforce | 6/3/2021 10:25 AM |
| 4 | Across the spectrum of ALL providers | 5/26/2021 11:23 AM |
| 5 | Again, make sure that they are a good fit for the job and not just interviewing for a paycheck. | 5/13/2021 5:14 PM |
| # | COMMENTS FOR "ESTABLISH AN ADVISORY BOARD WITH REPRESENTATIVES FROM DIVERSE COMMUNITIES" | DATE |
| 1 | See comment from above question. An advisory board is not a decision making entity. We NEED more diverse leadership in decision making rolesperiod. | 6/8/2021 4:05 PM |
| 2 | Low priority because "advisory boards" often have little to no power to enforce change on governmental institutions. If there's no authority given to the advisory board, I wouldn't waste the time on a performative gesture like this | 6/8/2021 12:45 PM |
| 3 | Waste of time unless you commit to using their suggestions for real change. | 5/13/2021 5:14 PM |
| # | COMMENTS FOR "PROVIDE PILOT GRANTS FOR INNOVATIVE PROJECTS TO IMPROVE ACCESS FOR MINORITY COMMUNITIES" | DATE |
| 1 | I think creating more equitable contracting practices so the existing programs in our community that are diverse and innovate already, but don't meet the DHHS/BHD contracting criteria should be top priority in being funded with a contract, not a one time pilot grant. That is not paving a way for real and impactful change. | 6/8/2021 4:05 PM |
| 2 | Ideally these kinds of innovative projects would begin with those already living/working in these underserved communities to ask their neighbors what they would find useful to improve mental health | 6/8/2021 12:45 PM |
| 3 | You should probably consult with these communities to see if this is even something they would want. | 5/17/2021 2:09 PM |
| 4 | This is integral! | 5/17/2021 1:50 PM |
| 5 | Depending on what work they will do, make sure that they have the expertise to do what they tell you they will do. | 5/13/2021 5:14 PM |
| # | COMMENTS FOR "BASE FAMILY NAVIGATORS AND PARENT PEER SPECIALISTS AT COMMUNITY AGENCIES OR SCHOOLS IN HIGH NEEDS AREAS." | DATE |
| 1 | I know that I trust people who have lived experience. They have been there and can provide true insight. They give examples of how they worked with the "system" | 6/11/2021 1:33 PM |
| 2 | Yes, yes, yes! Schools, food banks, W2 agencies, etc. Places where our most vulnerable community members seek support. | 6/8/2021 4:05 PM |
| 3 | Explore how these positions are collection info and dealing with their clients. Many times they can't keep up with their clients and you will see a lot of enrollments and then immediate closures without any results. | 5/13/2021 5:14 PM |
| # | COMMENTS FOR "OTHER IDEAS?" | DATE |
| | | |

| 3 Find ways to continue to work with homeless services agencies, especially shelters. Assess 5/17/2021 1:50 | |
|--|----|
| each incident and response and look for ways to improve that incorporates the caller's POV. | PM |
| 4 develop a campaign for Health Care and Financial Powers of Attorneys to have non- governmental interventions 5/13/2021 6:54 | PM |
| 5 recruit more people of color to become mh treatment providers. 5/13/2021 4:29 | PM |

Q13 8. Given the continuing public health concerns resulting from COVID-19, Milwaukee County is working to ensure continued access to mental health and substance use disorder treatment and services, as well as to maintain the health of providers and those receiving services.Do you have any recommendations or concerns?

Answered: 17 Skipped: 36

| # | RESPONSES | DATE |
|----|--|--------------------|
| 1 | Get vaccinated and/or keep wearing masks. | 6/8/2021 4:50 PM |
| 2 | Access to Universal broadband in our community to ensure more people have access to mental health/ substance use disorder services. Low-income people have access to government cell phones but they don't always have access to the internet. That makes NO sense for this high-tech world we ALL live in. If we are trying to achieve true equity, then everyone needs access to the internet. | 6/8/2021 4:05 PM |
| 3 | Vaccination. | 6/7/2021 1:18 PM |
| 4 | continue to offer telehealth where appropriate but offer in person services as soon as able. | 6/3/2021 12:54 PM |
| 5 | Continue to spread awareness of the availability or telehealth services to those who cannot receive services in person. | 6/2/2021 3:46 PM |
| 6 | Continue to build trust by providing more education that's being given by people that looks like them!! | 6/2/2021 1:13 PM |
| 7 | Bonus pay for Milwaukee County employees willing to provide in-person services. | 6/1/2021 8:01 PM |
| 8 | Telehealth has been helpful to provide access and should continue to be available. However, it should be a choice. Many people don't currently have devices and may have to use their phone - not a real choice. | 6/1/2021 6:57 AM |
| 9 | I think BHD ought to get back to work soon. Too many BHD clients have not been responded to quickly enough | 5/27/2021 8:50 AM |
| 10 | Nobody is talking about the high overdose or suicide rate. | 5/26/2021 10:31 AM |
| 11 | Just get everyone vaccinated | 5/21/2021 3:22 PM |
| 12 | Milwaukee County did very little. Agencies were on the front lines doing all the work. | 5/18/2021 2:41 PM |
| 13 | Provide more educational components especially in those underserved populations. | 5/17/2021 2:05 PM |
| 14 | Don't slash the room and board reimbursement for residential substance use disorder providers otherwise they will prioritize counties or contracts that can reimburse more, creating more inequity and less services for communities in need. | 5/14/2021 12:20 PM |
| 15 | Continue mandatory masks as long as possible. Today's reccs will make that difficult. | 5/13/2021 8:35 PM |
| 16 | Make sure that the providers are really working. many gave COVID the excusing for not doing their jobs. | 5/13/2021 5:14 PM |
| 17 | Get everyone vaccinated so we can focus on mental health and other issues | 5/13/2021 4:26 PM |
| | | |

Q14 9. BHD administers many mental health and substance abuse services, in the community, crisis services, and inpatient. Based on your experience: What is working well?

Answered: 24 Skipped: 29

| # | RESPONSES | DATE |
|----|---|--------------------|
| 1 | To have affordable housing and health care and support | 6/11/2021 7:26 AM |
| 2 | I truly don't know. It's a mixed bag. CCS has the most potential. | 6/8/2021 4:05 PM |
| 3 | I appreciate that Milwaukee BHD is already incorporating peer support into some spaces (like the non-crisis warmline). I also like the way that Milwaukee BHD incorporates community input at times. I appreciate that Milwaukee BHD is Zero Suicide-oriented and implements those principles into their care. | 6/8/2021 12:45 PM |
| 4 | People can show up at the bhd access clinic and get some asistance asap | 6/3/2021 12:54 PM |
| 5 | Bringing peer support into the system | 6/2/2021 6:04 PM |
| 6 | Community service providers are able to directly meet the needs of people in the community. | 6/2/2021 3:46 PM |
| 7 | Crisis response in the community is working well and mental health service availability for uninsured or underinsured individuals is working well in terms of provider availability. | 6/2/2021 2:32 PM |
| 8 | The substances that's in the community! | 6/2/2021 1:13 PM |
| 9 | Not much | 6/1/2021 8:01 PM |
| 10 | Good work has been done to try to address barriers for people enrolled in Family Care who need access to CCS and CSP. | 6/1/2021 6:57 AM |
| 11 | Genuinely committed staff are still working. Some program have more general relevance than others. I work at one of them. | 5/27/2021 8:50 AM |
| 12 | ALL of it works well, but is not fully integrated with all providers (such as in the Family Care program) | 5/26/2021 11:23 AM |
| 13 | CCS | 5/26/2021 10:31 AM |
| 14 | All of it. | 5/21/2021 3:22 PM |
| 15 | The contracted peer services. | 5/18/2021 2:41 PM |
| 16 | CSP, Crisis services and Access services are working well. | 5/17/2021 4:18 PM |
| 17 | crisis resource centers, having mental health counselors on site at shelters and community centers. | 5/17/2021 3:34 PM |
| 18 | The services offered are being utilized and are needed | 5/17/2021 3:20 PM |
| 19 | Going to PCS as a "patient" was one of the worst experiences of my life. There was nothing good about it. As a practitioner, I don't see many improvements in the lives of clients served by your programs. | 5/17/2021 2:09 PM |
| 20 | Crisis teams; open discussions in communities around mental health and substance abuse | 5/17/2021 2:05 PM |
| 21 | Team Connect Crisis Resource Centers (need more) | 5/13/2021 8:35 PM |
| 22 | Bringing people into the programs | 5/13/2021 5:14 PM |
| 23 | I appreciate the CART team | 5/13/2021 4:26 PM |
| 24 | The crisis centers are working well. | 5/13/2021 3:38 PM |

Q15 What is in need of improvement?

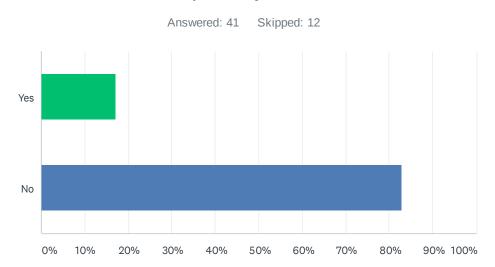
Answered: 26 Skipped: 27

| # | RESPONSES | DATE |
|----|--|--------------------|
| 1 | More affordable housing and health care | 6/11/2021 7:26 AM |
| 2 | More Diversity in the Mental Health Community in Milwaukee, WI. | 6/8/2021 4:50 PM |
| 3 | The disparities, lack of equity, and overt system racism are pervasive in the entire MH and SUD systems. But the truth of the matter is that it's not the system- it's the people who run the system. | 6/8/2021 4:05 PM |
| 4 | I think Milwaukee BHD needs to prioritize the safety of Milwaukee residents experiencing mental illness (especially the BIPOC population) by creating alternatives to police response for crisis. I want to see BHD address this with urgency. Other localities have utilized peer-led models and we can learn from them. We can't continue to waste time on this while people's safety and quality of life is at stake every time they encounter police and the possibility of death or unnecessary incarceration. | 6/8/2021 12:45 PM |
| 5 | residential services, incareased linkages to longer term therapy, medicaiton management, and other types of servces that would increase overall wellness. | 6/3/2021 12:54 PM |
| 6 | Other providers accepting peer support and not causing stigma within the brighter system | 6/2/2021 6:04 PM |
| 7 | There is too much administrative over site across too many agencies that is duplicated. Create as system in which the multiple BHD agencies communicate more effectively with each other. | 6/2/2021 3:46 PM |
| 8 | The crises services because the people who suffers from mental illness are still arrested too much! | 6/2/2021 1:13 PM |
| 9 | Everything | 6/1/2021 8:01 PM |
| 10 | Work force shortage - too much turnover with case managers. Not providing the level of support and responsiveness that consumers need. | 6/1/2021 6:57 AM |
| 11 | More efficiency. | 5/27/2021 8:50 AM |
| 12 | Increased collaboration across the spectrum of providers | 5/26/2021 11:23 AM |
| 13 | Education on the consequences for an individual who is part of the mental health system for staff. WI has one of the highest, if not the highest, rate of individuals under commitment. That is a great deal of funds that are being used that could potentially be better allocated for services or facilities. Looking at why this rate is so high, what services can be provided to get people stabilized and off commitment can free up significant resources. It may be convenient or easy to blame the individual with the mental illness, but BHD administrators may need to start thinking creatively and outside the box on how to get people off commitment which may include an increase of services that are optional to the patient upon discharge beyond a case manager that just sees if they take meds or not. When staff at BHD says that a person needs to have a hearing or be under a commitment to be "taught a lesson" that is a waste of funds and services. When there is a lack of placement options for a client upon discharge, the default should not be commitment. Housing services or creative resources should be looked into. | 5/26/2021 9:55 AM |
| 14 | All of it. There's not ENOUGH coverage. | 5/21/2021 3:22 PM |
| 15 | Medications and psychiatric consultations | 5/18/2021 2:41 PM |
| 16 | Residential services. There are persons we work with who really need a higher level of care than we can provide. When we send them to residential services they are usually discharged within a day or two with no real help given. | 5/17/2021 4:18 PM |
| 17 | mental health counselors at shelters, senior and family housing/programs. and most importantly, more children's therapist's at all programming to deal with trauma. It would be a game changer to reach a child who has experience trauma at a young age. if a child reveals a | 5/17/2021 3:34 PM |

| sexual assault we need to make it safe for the child and the adult to speak out. We need to |
|---|
| destigmatize that concept that nothing is going to change anyway. |

| 18 | We need to be able to serve more people more quickly. | 5/17/2021 3:20 PM |
|----|---|--------------------|
| 19 | Start treating people as people instead of objects in need of care. Help people create meaning in their life, don't sedate them with drugs. | 5/17/2021 2:09 PM |
| 20 | mobile crisis response the numbers may be low indicating it's underutilized, but many agencies don't bother calling anymore because of bad experience in previous responses or no response at all. There's A LOT of room to mend relationships with homeless services providers and other agencies. | 5/17/2021 1:50 PM |
| 21 | Less bureaucracy. Providers have to do a ton of administrative tasks that don't drive value or improve services for consumers. Please think and consult with providers before you require more recordkeeping or try to impose policies that don't work. | 5/14/2021 12:20 PM |
| 22 | Add peer respite centers as good low cost alternative to inpatient care. | 5/13/2021 8:35 PM |
| 23 | Making sure that you are getting results you need. | 5/13/2021 5:14 PM |
| 24 | more diverse providers | 5/13/2021 4:29 PM |
| 25 | It's however a lengthy process to get them on site we need more of them and a faster phone system | 5/13/2021 4:26 PM |
| 26 | The Mobile Crisis unit should have more diverse personnel involved. | 5/13/2021 3:38 PM |
| | | |

Q16 10. Are you willing to speak at a budget hearing? If so, please give your name, email and phone number in the next question and we will follow up with you.



| ANSWER CHOICES | RESPONSES | |
|----------------|-----------|----|
| Yes | 17.07% | 7 |
| No | 82.93% | 34 |
| TOTAL | | 41 |

| # | COMMENTS | DATE |
|---|---|--------------------|
| 1 | Not at this time | 6/11/2021 1:33 PM |
| 2 | I am interested in integrative opportunities for people with mental illness. That is my focused concern and commitment. | 5/27/2021 8:50 AM |
| 3 | I'll sign up separately | 5/14/2021 12:20 PM |
| 4 | I am a retiree of BHD and I don't think they would take my comments seriously. | 5/13/2021 5:14 PM |

Q17 11. Optional: Feel free to list your name and contact information. This can be helpful if there are follow up questions on your comments. This is optional.

Answered: 9 Skipped: 44

| ANSWER CHOICES | RESPONSES | |
|-----------------|-----------|---|
| Name | 88.89% | 8 |
| Company | 0.00% | 0 |
| Address | 0.00% | 0 |
| Address 2 | 0.00% | 0 |
| City/Town | 0.00% | 0 |
| State/Province | 0.00% | 0 |
| ZIP/Postal Code | 0.00% | 0 |
| Country | 0.00% | 0 |
| Email | 100.00% | 9 |
| Phone number | 77.78% | 7 |

| # | NAME | DATE |
|---|-------------------------|-------------------|
| 1 | Dianne Young | 6/8/2021 5:04 PM |
| | | |
| 2 | Lisa Williams | 6/8/2021 4:50 PM |
| 3 | Erica Steib | 6/8/2021 12:45 PM |
| 4 | Maria Nogueron | 6/7/2021 1:18 PM |
| 5 | Renee C Blechner | 6/2/2021 6:04 PM |
| 6 | PAUL BRODWIN | 5/14/2021 1:02 PM |
| 7 | Barbara Moser | 5/13/2021 8:35 PM |
| 8 | Julie Alexander | 5/13/2021 3:38 PM |
| # | COMPANY | DATE |
| | There are no responses. | |
| # | ADDRESS | DATE |
| | There are no responses. | |
| # | ADDRESS 2 | DATE |
| | There are no responses. | |
| # | CITY/TOWN | DATE |
| | There are no responses. | |
| # | STATE/PROVINCE | DATE |
| | There are no responses. | |
| | | |

| | | 2475 |
|---|-------------------------------------|-------------------|
| # | ZIP/POSTAL CODE | DATE |
| | There are no responses. | |
| # | COUNTRY | DATE |
| | There are no responses. | |
| # | EMAIL | DATE |
| 1 | dianneyoung520@gmail.com | 6/8/2021 5:04 PM |
| 2 | lwilliams@jfshousing.org | 6/8/2021 4:50 PM |
| 3 | erica@Mhawisconsin.org | 6/8/2021 12:45 PM |
| 4 | nogueronm@sbcglobal.net | 6/7/2021 1:18 PM |
| 5 | rblechner@hotmail.com | 6/2/2021 6:04 PM |
| 6 | nancy_szudzik@usc.salvationarmy.org | 5/17/2021 3:34 PM |
| 7 | BRODWIN@UWM.EDU | 5/14/2021 1:02 PM |
| 8 | barbaramwfb@gmail.com | 5/13/2021 8:35 PM |
| 9 | JAlexander@independencefirst.org | 5/13/2021 3:38 PM |
| # | PHONE NUMBER | DATE |
| 1 | 16083596348 | 6/8/2021 5:04 PM |
| 2 | 414-484-8396 | 6/8/2021 4:50 PM |
| 3 | 414-336-7984 | 6/8/2021 12:45 PM |
| 4 | 4146710711 | 6/7/2021 1:18 PM |
| 5 | 4142164703 | 6/2/2021 6:04 PM |
| 6 | 4148811844 | 5/14/2021 1:02 PM |
| 7 | 4146876007 | 5/13/2021 3:38 PM |
| | | |