

August 31, 2010

Dear Representatives, Senator and Committee Members:

I am Dr. Neal Blackburn, the Director of Unified Community Services of Grant and Iowa Counties, a professor at the University of Dubuque, and the past President of the Wisconsin County Human Service Association. I appreciate this opportunity to appear before you today to discuss Emergency Detentions.

It is my understanding that this special committee is charged with the task of: evaluating the appropriateness of Emergency Detentions; the inconsistencies of Emergency Detentions; the utilization of Emergency Detention procedures; the availability of Emergency Detention facilities; the cost of Emergency Detentions; and the inconsistent application of procedures relating to the admission of minors.

Today, I would like to provide comments on each issue starting with the appropriateness, utilization and inconsistencies of Emergency Detentions. I firmly believe the most significant reason inconsistencies occur is the lack of appropriate training and trust between law enforcement and human service personnel. When I was hired as the Director of Unified Community Services, law enforcement and our agency had an adversarial relationship. I realized that before law enforcement would trust my staff, they would have to trust me first. I then decided to do ride-alongs with a Sheriff's deputy once a week for a year. We built trust in each other and that trust spread to other law enforcement personnel. Today, I am pleased to say that our relationship with law enforcement is much like a partnership, a partnership built on trust.

Unfortunately, not all counties enjoy this relationship. Indeed, there are counties where resentment and distrust exist between human services and law enforcement. If these barriers can be broken, then training and partnership can exist and I believe we will see appropriate utilization of Emergency Detentions and consistency throughout the State.

Another key factor in the appropriate utilization of Emergency Detentions is recent Statutory change in 51.15(2), which now requires approval of the need for an Emergency Detention by the local county Department of Community Programs. Some law enforcement were initially resistant to this change; a change that requires them to contact the local crisis (on-call) staff. However, this change in Statute has enabled Human Services to initiate Crisis Diversion programs; these programs are successful in that it ensures the appropriate level of care for individuals in crisis. It also has saved law enforcement time and money for unnecessary Emergency Detentions.

The Department of Health Services awarded counties in the Southern Region a grant to develop crisis diversion programs. I am pleased to report that from July-December, 2009, over 1000 potential Emergency Detentions were diverted to a more appropriate situation. In Grant and Iowa Counties alone our Emergency Detentions are down 66% for 2010.

Supporting this shift into Crisis Diversion is the Attorney General's Opinion from May 13, 2004, the Attorney General states:

Grounds for detention of a person in custody under the criteria of Wis. Stat. 51.15(1)3 do not exist if reasonable provision for the individual's protection is available in the community and there is a reasonable probability that the individual will avail himself or herself of these services.

The Attorney General's opinion has paved the way for crisis workers to look for more suitable arrangements for individuals in crisis. Although we will always have a need for involuntary hospitalization, frequently we can make arrangements to resolve the crisis without placing the individual into protective custody.

In regards to the availability of Emergency Detention facilities and the associated cost, many counties are facing an ever growing crisis. I have personally seen two inpatient psychiatric facilities for Emergency Detentions close in the last ten years in Southern Wisconsin. Currently if a female in Platteville, Wisconsin is in need of an Emergency Detention, law enforcement must get prior medical clearance at a local emergency room (which can take hours) and then travel to Oshkosh, Wisconsin to Winnebago Mental Health Institute. If the detained subject requires a two person transport, the local law enforcement agency is likely looking at overtime for both officers. There is, in my opinion, a critical shortage of inpatient facilities which can receive Emergency Detentions.

The rate schedule for the mental health institutes has been revised and it now costs each county approximately \$1,000.00 per day/per client. Many of these clients do not have insurance that will pay these costs. If a county has a dangerous individual placed long term at Mendota Mental Health or Winnebago Mental Health, these costs must be absorbed by local county levy. It is easy to see that these costs can break a county's budget. I personally believe that counties must have some financial relief if a resident is placed long term in an institute with no possibility of community placement.

Finally, I want to speak briefly on the Emergency Detention of minors. As your reading material indicates, there are numerous factors that must be considered based on age and disability. However, what is missing is that counties have few options for a minor who is out of control and at a substantial risk of self-harm or harming others. Far too often family arguments explode into threats. When law enforcement is called, they have few options if the minor's behavior has escalated to a dangerous level. Frequently, the only option is to place the child into protective custody and perform an Emergency Detention. In many cases, hospitalization is not warranted and may even be counterproductive. Yet, too few options are at the disposal of law enforcement and crisis workers.

The Department of Children and Families and the Department of Health Services are working with the Wisconsin County Human Service Association and the Wisconsin Counties Association to provide more options. What we need is to have legislative change to involuntarily place a child for a few days in a residential setting to allow him or her to "cool off" and receive counseling and coping skills. Perhaps this committee would consider inviting personnel from both departments to update you on their progress and what statutorily must be changed.

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Again, I thank you for this opportunity to speak and wish you well in your study of Emergency Detentions. If I can be of further service to this special committee, please feel free to ask.

Sincerely,

Neal Blackburn, Ph.D.