**Central Wisconsin Health Partnership (CWHP) Meeting**

**Marquette County Department of Human Services**

**Wednesday, July 22nd 2015**

**Present:** Phil Robinson and LeRoy Dissing – Green Lake County DHS; Patti Wohlfeil – Waushara County Health Department; Dawn Buchholz and Jan Novak – Waushara County DHS; Chuck Price – Waupaca DHHS; Wade Rasmussen and Mandy Stanley – Marquette County DHS; Diane Cable – Adams County HHSD; Scott Ethun – Juneau County DHS; Joy Waterbury – Green Lake County Supervisor; Daniel Borowski – Attorney representing Green Lake County; Kathy Munsey – Green Lake County Public Health; Marge Bostelmann – Green Lake County Clerk; Deb Behringer – Waushara County Administrative Coordinator; Lori Martin – White Pine Consulting Service; Chuck Price – Waupaca County DHHS

1. **Introductions**
2. **Review of notes from May 27th meeting – no additions corrections, etc.**
3. **Neshkoro Area Community Center (NACC) Lease**
4. Phil asked for specific questions that visitors (Joy, Daniel, Marge, and Deb) would like addressed:
   * Deb Barringer – how does the CWHP committee operate? Questions whether the CWHP needs a resolution under Chapter 66 (General Municipality Law). Have the individual counties recognized the group through Board resolutions?
   * Dan Borowski – is the CWHP subject to open meeting laws? Legal liabilities?
5. Phil gave an overview of the history of the CWHP group, includes representation by FQHC, human services directors, and health directors. Brings together the perspectives of public health, integrated medicine, and behavioral health. Began meeting as an information group in 2011 with mission to expand access to health care services and opportunities. CCS is one of the region’s initiatives. The Neshkoro project falls under CCS – is part of the CCS continuum and is funded by CCS. Decision making regarding this program falls on each county’s Director.
6. Discussed the role of the CCS Regional Coordinating Committee (RCC). This is the structure for CCS decision-making and includes representation from each of the 6 county Human Services Boards as well as CCS Service Directors, and consumers. There has been transparency from the beginning with the Human Services Boards. In addition, all meeting notes are publicly available.
7. Discussed role of the CWHP –
   * Has always been considered an informal group – time to get together, share ideas, and collaborate. Much bigger than CCS and the NACC. Includes Public Health, economic issues, and the larger community/region. The desire is to keep the group informal.
   * Deb and Daniel expressed concerns regarding the impression that the CWHP is a decision-making group based on website content and the multi-county MOU. If it is a decision-making group, there are statutory requirements that must be met such as open meeting laws. Dan shared concern regarding FRI holding the lease and the appearance is that it comes back to the CWHP.
   * Discussion regarding role and responsibility of CWHP vs. CCS RCC. Mandy suggests the MOU be taken out of the CWHP and put under the RCC. There was general consensus, but Phil pointed out the decision making related to financial issues is on the DHS Directors, who are not currently voting member of the RCC.
8. Discussion regarding the NACC building
   * General / Overview
     + Phil explained CCS as a funding mechanism and the requirement for a regional initiative in order to receive 100% reimbursement. Discussion of CCS funding security into the future.
     + Diane and Scott shared their appreciation for the regional CCS efforts and the NACC. Lori shared the plans for expanding the site to a regional training center for CCS staff, providers, and community members.
     + Discussed the CCS “shared services model” and the vision for the future of the NACC, including the possibility of not only sharing services, but also possibly staff. Differentiated between the “shared services model” where each county maintains autonomy and decision-making at the local level, and the “multi-county model” (which the CWHP is not).
     + LeRoy shared a brief history - originally the NACC was going to purchase the building from the School District but backed out (reason unknown). NACC and the Westfield School District expressed interest in working with the CWHP and suggested the possibility of leasing the building from the School District for $20,000 / year. There were discussion regarding what entity would be in a position to hold the lease. The FRI board was approached – they weren’t interested in purchasing, but agreed to hold the lease. The current lease with the School District will expire on August 31st – they have made it clear that the want to sell the building. In preparation, the subject was brought back to the DSI and FRI boards. LeRoy sees one of 3 outcomes: 1) DSI and FRI committees walk away; 2) they considering renewing/extending the lease; or 3) they make an offer to purchase.
   * FRI / DSI / Green Lake Involvement
     + The Green Lake County Human Service Board passed a resolution that they will not support a purchase or continued lease of the NACC by FRI or DSI.
     + Marg voiced concern regarding FRI, a non-profit agency, purchasing the building – maintenance, structural improvements, liability, etc. Shared that Green Lake isn’t willing to take on all of the responsibilities.
     + Also concern regarding non-CCS activities taking place at the facility (community center activities) – FRI liability?
     + Discussed relationship between FRI/DSI and Green Lake County. Discussion regarding whether the County has the authority to dictate what FRI as a non-profit agency can do.
     + Kathy - Green Lake maintenance person visited NACC, and thought that updates may cost up to ½ million $ when you consider repairs and updates to become ADA compliant.
     + Discussed probable significant costs. LeRoy referenced the inspection completed by the professional commercial building inspector. Based on the report, several quotes from providers have been obtained including from a plumber who estimates $4,000 to $5000 to replace hot water heater; a roofer - rubber membrane needs to be replaced soon at $25,000, and further repairs likely in 6-8 years estimated at $75,000; HVAC $600 – $800. Marg - concern regarding other costs/ making it usable for the public – ADA upgrades, referenced a falling retaining wall that includes arsenic, rusting doors, broken railings, and crumbling steps.
     + Chuck commented on the potential cost savings of developing such a facility and referenced out-of-home placement costs. Other Directors commented on the lack of options for youth and adults who are in crisis and the costs – both financial and social/mental health. Phil mentioned current discussions with State DHS administrators regarding crisis diversion and the NACC as a possible site; as well as discussions with the NEW Partnership.
9. Discussion of options to move forward

* Phil recognized the importance of having open dialogue and this conversation today. Need to continue conversations, gather information, assess risk, and make collaborative decisions.
* Options discussed:
* NACC purchase or lease the property (unknown whether this is a possibility). How then would the region lease space – the CWHP isn’t a legal entity (would it be up to each individual county?)
* Find another place?
* Ask the School District if they’ll make the needed repairs prior to sale. Attorney comment - Westfield School Board has a resolution to not do any repairs and to sell the building. Phil suggests we approach the School District with the question – and make a proposal as part of sale.
* Have CWHP purchase – Directors feel this wouldn’t be acceptable with their Boards
* Other options of non-profits to purchase – approach CAP Services?

1. Next Steps

* Phil will talk with Cheryl Lofton regarding the RCC, CWHP, and authority; get clarifications. State needs to hear our experience - may not be unique to our region.
* Phil will connect with CAP to determine any possible interest
* The FRI / DSI Board meetings are next week – Phil and LeRoy will be attending
* CWHP / RCC role and responsibility discussion will be added to the August 5th RCC meeting
* Phil reiterated the importance of continued open and transparent discussion and collaboration moving forward

**4. Other agenda items**

1. CWHP Membership
   * + - Brief discussion regarding inviting other medical providers such as representative from ThedaCare or Community Health Network (CHN)
2. Economic Health Summit
   * + - Phil will send Economic Health Summit update from Sarah to the group
3. Next meeting: Wednesday, September 23rd, 8:30 – 11:00