

Port Washington, Wisconsin  
Wednesday, May 30, 2007

The Justice Initiatives Committee met in Room 118 of Administrative Center.

Meeting called to order at 3:35 PM by Chairperson Bock.

Present: Committee Members: Supervisor Bock, Ann Brownfield, JoAnne Manion, Marian Ballos, Ron Hauser, Shea Halula, Tom Kopp, Brenda Peterson, and Erin Ede.  
Other: Meridy Kehoe.  
Absent: Gerald Ebert, Jennifer Sullivan, Nina Walker, Mark Roherty, Terry Carr, Chuck Blumenfield, and Daryl Herrick.

1. Proper Notice and adoption of agenda: Motion made by Ann Brownfield to adopt the agenda, seconded by Ron Hauser. Motion carried 9-0.

Supervisor Bock took a moment to recognize two new committee members, Erin Ede and Brenda Peterson. Erin Ede is from the local National Association for the Mentally Ill (NAMI), and Brenda Peterson is from the Ozaukee Volunteer Center. Both members were asked to participate on the committee because of their specialized expertise in their respective areas.

2. Approval of April 23, 2007 Meeting Minutes: Motion made by Ron Hauser to adopt the April 23, 2007 meeting minutes, seconded by Marian Ballos. Motion carried 9-0.

3:47PM Jan Chapman Joins the Meeting.

3. Justice Initiative Committee Website Features/Function: Meridy Kehoe gave a brief summary of the proposed website features and functions stating that the website will serve mainly as a source for the committee to view relevant web links and articles. Posting of web links and articles will keep the amount of emails down to a minimum, and allow for other County Board members as well as the general public to see the types of information and programs the committee is working with.

4:00 PM: Meridy Kehoe is excused from the meeting.

4. Discussion – Successful Models/Potential Partners: Chairperson Bock began the discussion by going over Item #1, a list of successful programs that the committee could do further research on. After much discussion the committee agreed that Wraparound Milwaukee should come off the list of programs and that the following programs/models/potential partners should be added:

1. Independence First – A five (5) county program dedicated to helping youth and young adults who are cognitively and mentally disabled as well as those who are mentally ill.
2. Washington County Program: Independent Living Program for Youth: This program is dedicated to 18-21year-old people who have left home or been kicked out of their home and have nowhere to turn. The committee members will do more research on this program for the next meeting.
3. HUD or Landlord Association: The committee recognized these entities as potential partners in helping to solve housing issues for 18-21 year-olds in Ozaukee County.

The discussion then shifted to Item #3, a memo to the Committee from County Administrator Meaux regarding the various protocols for implementing the various recommendations the committee will have in the future. Supervisor Bock stated that this memo would serve as a guide throughout the process, being sure to note that this process will be ongoing and will not end with just one recommendation to the Health and Human Services Committee.

The discussion was then shifted to agenda Item #4, Supervisor Bock's notes on Wraparound Milwaukee. Supervisor Bock noted that although the committee has decided not to use Wraparound Milwaukee as a model program, the committee should consider the notes and broad ideas in a way that will work for Ozaukee County.

4:30PM – Nina Walker Joined the Meeting.

5. Discussion/Completion of Issues/Goals/Programs Partners Table: Item #5 was revised (see attached document) and members should replace their first copy with the updated version. The group reached the conclusion that they had to determine specific target populations to match the listed issues/goals/program/partners. A fifth column could be added to address this in the table. Important questions to consider as the committee moves forward are: What is the target population? What is the problem? And, what are the statistics to support the need?

It was also determined that the committee must look at existing assessment tools that include risks/needs, and possibly mental health information and make sure they are evidence based. They must be a part of any referral/treatment process. The committee also discussed the fact that parents and parenting are a significant part of all of this, and recognize that there are marginal parents and parents struggling with their own substance abuse/addiction, mental health issues and determine if there is a way to capture them.

They further concluded that the focus of the group must be on programs that not only meet the needs of target populations but also have measurable outcomes, have been proven to be effective, and save money. They recognized that some populations (children in long term care facilities for example) may be out of the scope of this committee.

6. Other Questions to Consider: The committee reviewed briefly Item #6 and asked committee members to keep this for reference at future meetings. The committee also determined the following: #1 – they should bring in families of drug/alcohol offenders to find out what worked/didn't work for them but need to finish the first part of their work and become more familiar with all the programs that exist before this. The committee recognized (Item #6, questions #2 & 3) that they will need some kind of Plan (preferably a 5 and or 10 year plan) and such a plan may include some kind of oversight committee; but that will come at the end of the process. Item #6, Question #4 – There is an existing model – coordinated services teams/coordinating committees – county wide and encompassing many counties. The committee agreed that whatever they do must be done cooperatively with what currently exists and not require new hires at this time.

7. Next Meeting Date/Future Agendas: Supervisor Bock reminded the group that we will be meeting in room 118 from now on. The group is challenged to come up with target populations that can be matched to the issues and give some thought to the prioritization of those populations and their issues for our next meeting. Committee members should continue to do their own research and pass along their findings to Meridy for inclusion on our website. The target populations should be sent to Meridy for consolidation in a document for our June meeting.

The next meeting is Wednesday, June 27, 2007 at 3:30PM in room 118 of the County Administration Building.

8. Adjournment: No motions made; meeting adjourned at 5:40PM.

\*Updated 5/30/07

ISSUES	GOALS	PROGRAMS	PARTNERS
<p>Many young people seeking county services lack positive role models            *Targets moderate to high risk kids – how could it apply to first time offenders?</p>	<p>Create a <b>volunteer</b> mentoring program matching adults and offenders <b>that is court ordered/mandated/part of a sanction program</b></p>	<p>VIP Program             *must be preceded by assessment and referral</p>	<p>Ozaukee Volunteer Center            Local Churches            Service Organizations            OCRTA (retired teachers)  <b>SCORE (retired executives)</b></p>
<p>Lack of meaningful community service opportunities as options for judges            *Targets first offenders and could extend to medium risk offenders</p>	<p>Create a program to match community service to offenders             *Volunteer Center CHAP program already in place</p>	<p>CHAPS             RAP (Restorative Action Program)</p>	<p>Ozaukee Volunteer Center   <b>DHS Case Managers</b>  <b>NOVA Services (West Bend)</b></p>
<p><del>First offenders are not held truly accountable, have a tendency to re-offend, do not receive treatment</del>  <b>First offenders must be assessed and referred for treatment based on age, risk, and offense -</b>  <b>*Treatment Courts have a specific target population which we must determine before proceeding</b></p>	<p>Create a Treatment Court            *Treatment courts require Cty Brd &amp; State approval but could convert some current court time with a willing judge.  <b>Create a First Offenders Program</b>   <b>*Create an assessment tool/program (risks/needs, evidence based)</b></p>	<p>Drug Court            Alcohol Court            Juvenile Court/ Teen Court</p>	<p><b>Assessments and educational/treatment programs could be handled by the Huiras Center and Starting Point of Ozaukee County</b>   <b>Must partner with judges/schools/private agencies</b>   <b>*Often the Court Commissioner determines the outcomes of cases when the offender pleads guilty or no contest</b></p>
<p>Lack of communication between Circuit and Municipal Courts   <b>*Committee will address this further on in our process</b></p>	<p>Create an oversight committee with representatives from each            Develop communication tools.  <b>* Could have a Review Committee/Management Council</b></p>		

Underage alcohol use is a problem in our county and addressing it early is essential	Create programs that can be court ordered and require assessment and referral	Prime for Life Under 21 Question about the population this really targets. Booze It or Lose It	Starting Point (Ozaukee Council) Huiras Center
Lack of support groups and open forums for youth to speak freely about issues. Need to help kids who return from treatment	Needs to be a county-wide effort – many students do not return to their schools but choose alternative schooling	Successful Families – Parent/Teen Workshops “Teens Together” (A.A. meeting)	School Districts (West Bend High School has some program like this) Huiras Center
Repeat offenders and long-term care recipients consume an overwhelming amount of resources *Target chronic offenders (20% of our population) Child welfare long term care population may be out of our realm	Utilize a CMO to assess individuals and refer them to alternate programs *We have a CMO – it’s Family Partnerships Initiative	Wraparound Milwaukee  FPI STEPS	

“Homeless” teens in our county need assistance in finding housing and support to finish their education and find employment	Create a program to address this	Independent Living Program for Youth (Washington Cty) Youth and Family Project	
Mental illness often plays a significant role in the lives of offenders	Create an (or a portion of an) assessment tool to address this. Does this require different kinds of referrals?		